

2

85-41600

Certificate of Marriage
State of Maryland

LICENSE NO.
 8272

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 9th day of November 19 85

the following persons were by me united in marriage at Pocomoke

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **Minister Faith Wright** Age **29** Birthplace **Maryland**
 Groom's Residence **507 5th Ave.**
Pocomoke City Worcester Maryland Marital Status **Single**
 (State)

Bride's Name **Deborah Jeanette Smith** Age **23** Birthplace **Maryland**
 Bride's Residence **507 5th Ave.**
Pocomoke City Worcester Maryland Marital Status **Single**
 (State)

Relationship to groom if any **Not related**

Isaac Jenkins

Name of Officiating Clergyman or Authorized Officer

Baptist Minister

Title and Religious Denomination or Office

711 Short Street, Pocomoke City, Md.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **Nov. 13, 1985**

License Fee - Resident \$
 Non-Resident \$

Warne C. Little
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41601

Certificate of Marriage
State of Maryland

LICENSE NO.
 8231

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 16th day of November 1985

the following persons were by me united in marriage at Ocean City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **Brian Lee Parsons**

Age **23** Birthplace **Maryland**
 (State)

Groom's **300 Monticello Ave.**

Residence **Salisbury Wicomico Maryland** Marital Status **Single**

Bride's

Name **Susan Jean Podlaseck**

Age **21** Birthplace **Maryland**
 (State)

Bride's **352 Walston Switch Road**

Residence **Salisbury Wicomico Maryland** Marital Status **Single**

Relationship to groom if any

Not related

Rev. R.F. Gardiner

Name of Officiating Clergyman or Authorized Officer

Catholic Priest and Pastor

Title and Religious Denomination or Office

P.O. Box 2117 MBS, Ocean City, Md.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 19, 1985

License Fee - Resident \$
 Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41602

Certificate of Marriage

State of Maryland

LICENSE NO.

8241

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 2nd day of November 1985

the following persons were by me united in marriage at Ocean City, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **David Lockwood** Age **26** Birthplace **Maryland**
 Groom's Residence **109 Oyster Lane**
Ocean City Worcester Maryland Marital Status **Single**

Bride's Name **Jacqueline Schneider** Age **24** Birthplace **New Jersey**
 Bride's Residence **Rt. 1 Box 93A**
Berlin Worcester Maryland Marital Status **Single**

Relationship to groom if any **Not related**

Rev. R.F. Gardiner

Name of Officiating Clergyman or Authorized Officer

License Date **Oct. 14 85**

Priest and Pastor, Roman Catholic

Title and Religious Denomination or Office

14203 Sinepuxent Ave., Ocean City, Md.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 5, 1985

License Fee - Resident \$
 Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41603

Certificate of Marriage
State of Maryland

LICENSE NO.
 8256

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 1st day of November 19 85

the following persons were by me united in marriage at Pocomoke City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---|----------------|-----------|----------------|-----------------|
| Groom's Name | John Wayne Kelly | Age | 26 | Birthplace | Maryland |
| Groom's Residence | 706 Cedar St., Apt. A Pocomoke Worcester | | | (State) | |
| Bride's Name | Jennifer Ann David | Age | 22 | Birthplace | Germany |
| Bride's Residence | 706 Cedar St. Apt. A Pocomoke Wordester | | | (State) | |
| | | Marital Status | | | Single |
| | | | | Marital Status | Single |

Relationship to groom if any **Not related**

Richard C. Hughes

Name of Officiating Clergyman or Authorized Officer

License Date **Oct. 24, 85**

Pastor, Pitts Creek Presbyterian Church

Title and Religious Denomination or Office

P. O. Box 266, Pocomoke City, Md. 21851

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 4, 1985

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41604

Certificate of Marriage
State of Maryland

LICENSE NO.
 8262

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 2nd day of Nov. 1985

the following persons were by me united in marriage at Ironshire, Berlin, Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|--|----------------|---------------|------------|-----------------|
| Groom's Name | Lewis H. Dixon, Jr. | Age | 28 | Birthplace | Maryland |
| Groom's Residence | Rt. 3 Box 674 Berlin Worcester Maryland | Marital Status | Single | | |
| Bride's Name | Belinda Ann Foreman | Age | 25 | Birthplace | Maryland |
| Bride's Residence | Flower St. Berlin Worcester Maryland | Marital Status | Single | | |
| Relationship to groom if any | Not related | | | | |

Rev. Clarence R. Burke

Name of Officiating Clergyman or Authorized Officer

License Date **Oct. 29 85**

Minister United Methodist Church

Title and Religious Denomination or Office

P. O. Box 251, Salisbury, Md.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 29, 1985

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41605

LICENSE NO.
 8265

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 2nd day of November 19 85

the following persons were by me united in marriage at Snow Hill

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **Joseph Cardell McClellan** Age **40** Birthplace **Maryland**
(State)
 Groom's Residence **P.O. Box 26503**
Baltimore Baltimore Maryland Marital Status **Widower**
 Bride's Name **Stephanie Anita Waters** Age **30** Birthplace **Maryland**
(State)
 Bride's Residence **Rt. #3, Box 300**
Snow Hill Worcester Maryland Marital Status **Single**
 Relationship to groom if any **Not related**

Rev. James O. Waters

Name of Officiating Clergyman or Authorized Officer

License Date **Nov. 1 85**

United Methodist Minister

Title and Religious Denomination or Office

14205 Waters Way, Brandywine, Md. 20613

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 4, 1985

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41606

Certificate of Marriage

State of Maryland

LICENSE NO.

8266

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 4 day of November 19 85the following persons were by me united in marriage at Goodwill Baptist Church

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**George Joseph Dugan**Age **29** Birthplace **Canada**
(State)Groom's
Residence**Rt. #1, Box 307****Stockton Worcester Maryland**Marital Status **Single**Bride's
Name**Joanne C. Marshall**Age **37** Birthplace **Maryland**
(State)Bride's
Residence**Rt. #1, Box 307****Stockton Worcester Maryland**Marital Status **Divorced**

Relationship to groom if any

Not relatedRobert Adkins, Jr.

Name of Officiating Clergyman or Authorized Officer

License Date **Nov. 1, 85**Baptist Minister

Title and Religious Denomination or Office

Pocomoke, Maryland 21851

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 6, 1985License Fee - Resident \$
Non-Resident \$Wm C. Little
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41607

LICENSE NO.
 8270

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 11th day of November 1985

the following persons were by me united in marriage at Ocean City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **Marshall Scott Boykin**

Age **23** Birthplace **Maryland**
 (State)

Groom's **313 Cedar Drive**
 Residence **Salisbury Wicomico Maryland**

Marital Status **Single**

Bride's

Name **Jane Crawford Custer**

Age **19** Birthplace **Georgia**
 (State)

Bride's **313 Cedar Drive**
 Residence **Salisbury Wicomico Maryland**

Marital Status **Single**

Relationship to groom if any **Not related**

Rev. Van G. Heslop

Name of Officiating Clergyman or Authorized Officer

License Date **Nov. 6 85**

Ordained Minister Delmarva Church

Title and Religious Denomination or Office

107 E. Lillian St., Hebron, Md. 21830

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 13, 1985

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41608

Certificate of Marriage

State of Maryland

LICENSE NO.

8074

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 16th day of November 19 85

the following persons were by me united in marriage at Berlin

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

Dale Avery Cathell

Age 33 Birthplace Maryland
(State)

Groom's

Rt. #4 Box 267

Residence

Berlin Worcester Maryland

Marital Status Divorced

Bride's

Name

Marsha Elizabeth Berwanger

Age 39 Birthplace Maryland
(State)

Bride's

2805 Philadelphia Ave.

Residence

Ocean City Worcester Maryland Marital Status Divorced

Relationship to groom if any

Not related

Rev. Gary L. Baer

Name of Officiating Clergyman or Authorized Officer

License Date July 25, 85

Minister Buckingham Presbyterian Church

Title and Religious Denomination or Office

Berlin, Maryland 21811

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 19, 1985

License Fee - Resident \$
Non-Resident \$

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41609

Certificate of Marriage
State of Maryland

LICENSE NO.
 8198

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 16 day of November 1985

the following persons were by me united in marriage at Berlin, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---|----------------|---------------|------------|----------------------------|
| Groom's Name | Robert James Elliott | Age | 23 | Birthplace | Ala. (State) |
| Groom's Residence | 2 Bryan Avenue Berlin Worcester Maryland | Marital Status | Single | | |
| Bride's Name | Linda Gail Loughrey | Age | 23 | Birthplace | Maryland (State) |
| Bride's Residence | 2709 Ocean Pines Berlin Worcester Maryland | Marital Status | Single | | |

Relationship to groom if any **Not related**

Donald O. Hornung

Name of Officiating Clergyman or Authorized Officer

License Date **Sept. 16** **85**

Minister Methodist Church

Title and Religious Denomination or Office

Berlin, Maryland 21811

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on November 25, 1985

License Fee - Resident \$
 Non-Resident \$

Wayne C. Littleton
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41610

LICENSE NO.
 8214

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 3 day of November 19 85

the following persons were by me united in marriage at St. Mary Star of Sea, Ocean City
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | | | |
|-----------|-------------------------------|------------------|-----------------|----------------|---------------|------------|----------|
| Groom's | | | | Age | 31 | Birthplace | Maryland |
| Name | Joseph Patrick Stigler | | | | | (State) | |
| Groom's | 115D Newport Bay Drive | | | | | | |
| Residence | Ocean City | Worcester | Maryland | Marital Status | Single | | |
| Bride's | | | | Age | 30 | Birthplace | Maryland |
| Name | Donna Marie Guertler | | | | | (State) | |
| Bride's | 115D Newport Bay Drive | | | | | | |
| Residence | Ocean City | Worcester | Maryland | Marital Status | Single | | |

Relationship to groom if any **Not related**

Rev. Philip McGann

Name of Officiating Clergyman or Authorized Officer

License Date **Sept. 25** 85

Pastor, St. Mary Star of Sea

Title and Religious Denomination or Office

208 South Balto. Ave., Ocean City, Md.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 12, 1985

License Fee - Resident \$
 Non-Resident \$

Worne C. Littleton

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41611

Certificate of Marriage
State of Maryland

LICENSE NO.
 8291

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 24 day of November 1985

the following persons were by me united in marriage at Ocean City, Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|--|--------------------|-----------------|------------|-----------------------------|
| Groom's Name | Thomas Ward Ratcliff | Age | 38 | Birthplace | Virginia (State) |
| Groom's Residence | 410 Lark Drive Ocean City Worcester Maryland | Marital Status | Divorced | | |
| Bride's Name | Ronalda Annette Mehllum | Age | 33 | Birthplace | S. Dakota (State) |
| Bride's Residence | 410 Lark Drive Apt. 4 Ocean City Worcester Maryland | Marital Status | Divorced | | |
| Relationship to groom if any | | Not related | | | |

Rev. Allen A. Snead

Name of Officiating Clergyman or Authorized Officer

Pastor Christian Fellowship Church

Title and Religious Denomination or Office

Main Street, Preston, Md. 21655

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 29, 1985

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41612

Certificate of Marriage
State of Maryland

LICENSE NO.
 8293

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 27th day of November 19 95

the following persons were by me united in marriage at Berlin, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---|----------------|---------------|------------|----------------------------|
| Groom's Name | Dale Wayne Morris, Jr. | Age | 22 | Birthplace | Maryland (State) |
| Groom's Residence | Rt. 2 Box 62 Berlin Worcester Maryland | Marital Status | Single | | |
| Bride's Name | Sheila Jean Hicks | Age | 22 | Birthplace | Georgia (State) |
| Bride's Residence | Rt. 2 Box 62 Berlin Worcester Maryland | Marital Status | Single | | |

Relationship to groom if any **Not related**

Ashely A. Maxwell

Name of Officiating Clergyman or Authorized Officer

Minister the United Methodist Church

Title and Religious Denomination or Office

111 Branch St. , Berlin, Md. 21811

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 27, 1985

License Fee - Resident \$
 Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41613

Certificate of Marriage
State of Maryland

LICENSE NO.
8287

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 23 day of November 1985

the following persons were by me united in marriage at Ocean City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|--------------------------------------|----------------|---------------|------------|----------------------------|
| Groom's Name | Bryan Wayne Chetelat | Age | 29 | Birthplace | Maryland (State) |
| Groom's Residence | Box 1766 MBS | | | | |
| | Ocean City Worcester Maryland | Marital Status | Single | | |
| Bride's Name | Laurie Lynne Williams | Age | 26 | Birthplace | Maryland (State) |
| Bride's Residence | Box 1766 MBS | | | | |
| | Ocean City Worcester Maryland | Marital Status | Single | | |

Relationship to groom if any **Not related**

Randolph W. Barr

Name of Officiating Clergyman or Authorized Officer

Pastor St. Peter's Lutheran Church

Title and Religious Denomination or Office

Ocean City, Maryland

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 26, 1985

License Fee - Resident \$
Non-Resident \$

Warne C. Littleton
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41614

Certificate of Marriage
State of Maryland

LICENSE NO.
 8215

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 28th day of Sept. 1985

the following persons were by me united in marriage at Snow Hill

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|--|-----|----------------|---------------|----------------------------|
| Groom's Name | Elton William Reed | Age | 27 | Birthplace | Virginia (State) |
| Groom's Residence | 193-9 Deep Hole Rd. Chincoteague Accomack | Va. | Marital Status | Single | |
| Bride's Name | Karen Ann Wheeler | Age | 18 | Birthplace | Cuba (State) |
| Bride's Residence | 193-9 Deep Hole Rd. Chincoteague Accomack | Va. | Marital Status | Single | |

Relationship to groom if any

Not related

Gilbert F. Perdue

Name of Officiating Clergyman or Authorized Officer

Pastor Baptist

Title and Religious Denomination or Office

Rt. #3, Box 195, Snow Hill, Md. 21863

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 8, 1985

License Fee - Resident \$
 Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41615

Certificate of Marriage

State of Maryland

LICENSE NO.
8252

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 26th day of October, 1985,

the following persons were by me united in marriage at Ocean City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

Mark Anthony Gasiorowski

44

Age

31

Birthplace

N. York

(State)

Groom's

Residence

31694 Ponderosa Way

Evergreen Jefferson

Colo.

Marital Status

Single

Bride's

Name

Susan Patricia Liljenquist

46

Age

29

Birthplace

Wash. D.C.

(State)

Bride's

Residence

Rt. #1, Box 122C

Selbyville Sussex

De.

Marital Status

Divorced

Relationship to groom if any

Not related

Rev. Robert Lee Harris

Name of Officiating Clergyman or Authorized Officer

License Date Oct. 22, 85

Atlantic United Meth. Church

Title and Religious Denomination or Office

P. O. Box 88, Ocean City, Md, 21842

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Oct. 22, 1985.

License Fee - Resident \$
Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41616

Certificate of Marriage

State of Maryland

LICENSE NO.

8254

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 26 day of October, 19 85,the following persons were by me united in marriage at Pocomoke City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **David Paul Redinger** 25 Age **23** Birthplace **Maryland**
 Groom's **10 Clarke Avenue**
 Residence **Pocomoke City Worcester Maryland** Marital Status **Single**
 Bride's Name **Della Mae Kelley** 83 Age **20** Birthplace **Va.**
 Bride's **Box 68-8**
 Residence **Temperanceville Accomack Va.** Marital Status **Single**

Relationship to groom if any

Not related

Thomas J. Wall

Name of Officiating Clergyman or Authorized Officer

United Methodist Minister

Title and Religious Denomination or Office

Pocomoke City, Maryland

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Oct. 23, 1985

License Fee - Resident \$
 Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41617

Certificate of Marriage
State of Maryland

LICENSE NO.
 8257

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 26th day of October, 1985,

the following persons were by me united in marriage at Ocean City, Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---|----------------|---------------|------------|-----------------|
| Groom's Name | Ricky Lee Kenton | Age | 26 | Birthplace | Delaware |
| Groom's Residence | 512 Marshall St. Milford Sussex Del. | Marital Status | Single | | |
| Bride's Name | Kimann Randall Stefanye | Age | 27 | Birthplace | Maryland |
| Bride's Residence | 512 Marshall St. Milford Sussex Del. | Marital Status | Single | | |

Relationship to groom if any

Not related

Rendell H. Davis

Name of Officiating Clergyman or Authorized Officer

Minister, First Presbyterian Church

Title and Religious Denomination or Office

1301 Philadelphia Ave., Ocean City, Md.

Address of Clergyman or Authorized Officer

21842

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Oct. 30, 1985.

License Fee - Resident \$
 Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41618

Certificate of Marriage

State of Maryland

LICENSE NO.

8248

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 19th day of October, 1985,

the following persons were by me united in marriage at Ocean City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|--|-----|-----------|----------------|-----------------|
| Groom's Name | Stephen S. Lovell | Age | 37 | Birthplace | Maryland |
| Groom's Residence | 704 S. Jefferson St. Allentown Lehigh | Pa. | | Marital Status | Divorced |
| Bride's Name | Janet R. Mamrak | Age | 40 | Birthplace | N.J. |
| Bride's Residence | 704 S. Jefferson St. Allentown Lehigh | Pa. | | Marital Status | Divorced |

Relationship to groom if any

Not related

Rev. Robert Lee Harris

Name of Officiating Clergyman or Authorized Officer

Atlantic United Meth. Church

Title and Religious Denomination or Office

P.O. Box 88, Ocean City, Md. 21842

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Oct. 22, 1985

License Fee - Resident \$
Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41619

Certificate of Marriage
State of Maryland

LICENSE NO.
 8245

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 26th day of October, 1985

the following persons were by me united in marriage at Bishopville

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | | |
|-------------------|--|-----------|----------------|---------------|------------|----------------------------|
| Groom's Name | Jeffrey Thomas Bunting | <u>46</u> | Age | 21 | Birthplace | Delaware (State) |
| Groom's Residence | Ocean View Sussex Delaware | | Marital Status | Single | | |
| Bride's Name | Leslie Lee Lyons | <u>25</u> | Age | 20 | Birthplace | Virginia (State) |
| Bride's Residence | 210 Worcester St. Ocean City Worcester Maryland | | Marital Status | Single | | |

Relationship to groom if any **Not related**

Rev. Ronald H. Soulsman

Name of Officiating Clergyman or Authorized Officer

License Date **Oct. 17 85**

Licensed Minister - Church of God

Title and Religious Denomination or Office

Rt. 2, Box 334 - Berlin, Md. 21811

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **Oct. 30, 1985**

License Fee - Resident \$
 Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41620

Certificate of Marriage

State of Maryland

LICENSE NO.

8290

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 23 day of November 19 85

the following persons were by me united in marriage at Pocomoke City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

Lance Daneker Watkinson

Age

21

Birthplace

Virginia
(State)

Groom's

Residence

121 Stark St. Apt. 2

Portsmouth

Rockingham

N.H.

Marital Status

Single

Bride's

Name

Joyce Lynn Hardin

Age

22

Birthplace

Virginia
(State)

Bride's

Residence

121 Stark St. Apt. 2

Portsmouth

Rockingham

N.H.

Marital Status

Single

Relationship to groom if any

Not related

Thomas J. Wall

Name of Officiating Clergyman or Authorized Officer

United Methodist Minister

Title and Religious Denomination or Office

Pocomoke City, Maryland

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 26, 1985

License Fee - Resident \$
Non-Resident \$

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41621

Certificate of Marriage

State of Maryland

LICENSE NO.

8004

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 23rd day of November 19 85

the following persons were by me united in marriage at Ocean City, Md. 21842

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
NameWilliam Francis Brady
26 Sand Dollar Lane

46

Age 21

Birthplace

Maryland
(State)

Groom's

Residence

Selbyville Sussex

De.

Marital Status

Single

Bride's

Name

Lisa Ann Dinges

25

Age 19

Birthplace

Maryland
(State)

Bride's

Residence

211 Coulbourne Mill Road
Salisbury Wicomico

Maryland

Marital Status

Single

Relationship to groom if any

Not related

Rev. Philip McGann

Name of Officiating Clergyman or Authorized Officer

License Date July 1, 85

Pastor (Catholic) St. Mary Star of the

Title and Religious Denomination or Office

Sea

208 S. Baltimore, Ave., Ocean City, Md.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 26, 1985

License Fee - Resident \$
Non-Resident \$

Warne C. Littleton

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41622

Certificate of Marriage
State of Maryland

LICENSE NO.
 8271

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 16th day of November 1985

the following persons were by me united in marriage at Ocean City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---|----------|----------------|---------------|----------------------------|
| Groom's Name | Lee H. Deakyne | Age | 26 | Birthplace | Delaware (State) |
| Groom's Residence | 10 S. Market St. Smyrna Kent | Delaware | Marital Status | Single | |
| Bride's Name | Cynthia L. Emler | Age | 24 | Birthplace | N. Y. (State) |
| Bride's Residence | 10 S. Market St. Smyrna Kent | Delaware | Marital Status | Single | |

Relationship to groom if any

Not related

Howard E. Evans

Name of Officiating Clergyman or Authorized Officer

United Methodist Minister

Title and Religious Denomination or Office

Delmar, De.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 25, 1985

License Fee - Resident \$
 Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41623

Certificate of Marriage

State of Maryland

LICENSE NO.

8275

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 9th day of November 1985the following persons were by me united in marriage at St. Mary Star of the Sea, Ocean
City

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

David Dehler

Age 23

Birthplace

New York

(State)

Groom's

Residence

2531 Huntington Avenue

Alexandria

Fairfax

Va.

Marital Status

Single

Bride's

Name

Linda Judith Roth

Age

23 Birthplace

Virginia

(State)

Bride's

Residence

2531 Huntington Avenue

Alexandria

Fairfax

Va.

Marital Status

Single

Relationship to groom if any

Not related

Rev. Philip McGann

Name of Officiating Clergyman or Authorized Officer

License Date Nov. 8, 85

Pastor, St. Mary Star of the Sea

Title and Religious Denomination or Office

208 S. Balto. Ave., Ocean City

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 13, 1985

License Fee - Resident \$
Non-Resident \$

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41624

Certificate of Marriage

State of Maryland

LICENSE NO.

8190

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 17th day of October, 9 19 85

the following persons were by me united in marriage at Snow Hill, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

Thomas Andrew Foreman

Age

27

Birthplace

Maryland

Groom's

Rt. #4, Box 107 Pine Oak Lane

Residence

Berlin

Worcester

Maryland

Marital Status

Single

Bride's

Name

Regina Rene Brittingham

Age

24

Birthplace

Maryland

Bride's

Rt. #4 Box 107 Pine Oak Lane

Residence

Berlin

Worcester

Maryland

Marital Status

Single

Relationship to groom if any

Not related

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer

Clerk of the Circuit Court

Title and Religious Denomination or Office

Snow Hill, Maryland 21863

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on October 17, 1985.

License Fee - Resident \$
Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41625

Certificate of Marriage

State of Maryland

LICENSE NO.

8250

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 21st day of October 9 1985

the following persons were by me united in marriage at Snow Hill, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|------------------------------|----------------|--------|------------|----------|
| Groom's Name | Rodney Beckett | Age | 32 | Birthplace | Maryland |
| | | | | | (State) |
| Groom's Residence | 412 Dighton Ave. | | | | |
| | Snow Hill Worcester Maryland | Marital Status | Single | | |
| Bride's Name | Faye Price | Age | 28 | Birthplace | Maryland |
| | | | | | (State) |
| Bride's Residence | 617A Fitzwater St. | | | | |
| | Salisbury Wicomico Maryland | Marital Status | Single | | |

Relationship to groom if any Not related

Nina Ray Jones

Name of Officiating Clergyman or Authorized Officer

License Date Oct. 21 85

Asst. Chief Deputy Clerk

Title and Religious Denomination or Office

Court House, Snow Hill, Maryland

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on October 21, 1985

License Fee - Resident \$
Non-Resident \$

W. C. Little

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41626

LICENSE NO.
 8260

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 25th day of October 9 1985

the following persons were by me united in marriage at Snow Hill, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **Jay Randall Pfeiffer**

Age **41** Birthplace **Maryland**
(State)

Groom's **220 Dawson Drive**

Residence **Cockeysville Baltimore Maryland** Marital Status **Divorced**

Bride's

Name **Katherine H. Lloyd**

Age **30** Birthplace **Wash., D.C.**
(State)

Bride's **220 Dawson Drive**

Residence **Cockeysville Baltimore Maryland** Marital Status **Divorced**

Relationship to groom if any

Not related

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer

License Date **Oct. 25 85**

Clerk of Circuit Court

Title and Religious Denomination or Office

Snow Hill, Maryland

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on October 25, 1985

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41627

Certificate of Marriage
State of Maryland

LICENSE NO.
 8284

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 15th day of November 9 19 85

the following persons were by me united in marriage at Snow Hill, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|--|------------|----------------|-----------------|-----------------------------|
| Groom's Name | Harry C. Warrington | Age | 66 | Birthplace | N. Jersey (State) |
| Groom's Residence | Rt. #4, Box 310A Chestertown Kent | Md. | Marital Status | Divorced | |
| Bride's Name | Lois Kendall Crew | Age | 46 | Birthplace | Maryland (State) |
| Bride's Residence | Rt. #4, Box 310A Chestertown Kent | Md. | Marital Status | Divorced | |

Relationship to groom if any **Not related**

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer

License Date **Nov. 15,** **85**

Clerk of the Circuit Court

Title and Religious Denomination or Office

Snow Hill, Maryland 21863

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

Nov. 15, 1985

office on

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41628

Certificate of Marriage
State of Maryland

LICENSE NO.
 8288

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 20th day of November 1985

the following persons were by me united in marriage at Snow Hill, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
 Name

George W. Tudor

Age **40** Birthplace **Canada**
 (State)

Groom's

10706 Cardington Way, Apt. 202

Residence

Hunt Valley Baltimore Maryland Marital Status **Divorced**

Bride's

Name

Karen E. Tudor

Age **39** Birthplace **N.C.**
 (State)

Bride's

10706 Cardington Way, Apt. 202

Residence

Hunt Valley Baltimore Maryland Marital Status **Divorced**

Relationship to groom if any

Not related

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer

License Date **Nov. 20,** **85**

Clerk of the Circuit Court

Title and Religious Denomination or Office

Snow Hill, Maryland 21863

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **Nov. 20, 1985**

office on

Warne C. Littleton

Signature — Clerk of the Court

License Fee - Resident \$
 Non-Resident \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41629

Certificate of Marriage

State of Maryland

LICENSE NO.

8298

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 29th day of November 9 1985the following persons were by me united in marriage at Snow Hill

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---------------------------------|----------------|---------------|------------|-------------------|
| Groom's Name | John Wayne Bunting | Age | 23 | Birthplace | Maryland |
| Groom's Residence | 512 S. Surf Road | | | (State) | |
| | Ocean City Worcester Md. | Marital Status | Single | | |
| Bride's Name | Gbory Roushell Chester | Age | 19 | Birthplace | Wash. D.C. |
| Bride's Residence | 512 S. Surf Road | | | (State) | |
| | Ocean City Worcester Md. | Marital Status | Single | | |

Relationship to groom if any **Not related**

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer

Clerk of the Circuit Court

Title and Religious Denomination or Office

Snow Hill, Md.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Nov. 29, 1985

License Fee - Resident \$
Non-Resident \$

Warne C. Littleton

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41630

Certificate of Marriage
State of Maryland

LICENSE NO.
 8258

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 24th day of October 1985

the following persons were by me united in marriage at Snow Hill, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
 Name **William Francis Short**

Age **55** Birthplace **De.**
 (State)

Groom's **#3 Hickman Street**

Residence **Rehobeth Sussex Delaware**

Marital Status **Single**

Bride's
 Name **Dorothy Meretta Truitt**

Age **55** Birthplace **De.**
 (State)

Bride's **R.D. #2, Box 111**

Residence **Milford Sussex Delaware**

Marital Status **Divorced**

Relationship to groom if any

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer

License Date **Oct. 24, 85**

Clerk of Circuit Court

Title and Religious Denomination or Office

Court House, Snow Hill, Maryland

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on October 24, 1985

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41631

LICENSE NO.
 8246

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 18th day of October 9 1985

the following persons were by me united in marriage at Snow Hill, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

Brent L. Griffin

46

Age

20

Birthplace

Michigan
 (State)

Groom's

Residence

**PSC 1 Box 52321 AFB
 Dover Kent**

De.

Marital Status

Single

Bride's

Name

Kathleen L. Haws

72

Age

20

Birthplace

Ohio
 (State)

Bride's

Residence

**970 Pinecreek Drive
 Dayton Montgomery**

Ohio

Marital Status

Single

Relationship to groom if any

Not related

Nina Ray Jones

Name of Officiating Clergyman or Authorized Officer

License Date **Oct. 18** **85**

Assistant Chief Deputy Clerk of Court

Title and Religious Denomination or Office

Snow Hill, Maryland

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on October 18, 1985

License Fee - Resident \$
 Non-Resident \$

Warr C. Gittleson
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41632

Certificate of Marriage
State of Maryland

LICENSE NO.
 8249

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 18th day of October ⁹ 1985

the following persons were by me united in marriage at Snow Hill

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|--|--------------------|-------------------|----------------|------------------------|
| Groom's Name | John Haines | Age | 41 | Birthplace | Utah (State) |
| Groom's Residence | 113B Allen Drive North Wildwood | Cape May | New Jersey | Status | Single |
| Bride's Name | Helen Steedle | Age | 42 | Birthplace | Pa. (State) |
| Bride's Residence | 113B Allen Drive North Wildwood | Cape May | New Jersey | Marital Status | Single |
| Relationship to groom if any | | Not related | | | |

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer
Clerk of the Circuit Court

Title and Religious Denomination or Office

Snow Hill, Md. 21863

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on Oct. 18, 1985

License Fee - Resident \$
 Non-Resident \$

Warne C. Littleton
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41633

Certificate of Marriage

State of Maryland

LICENSE NO.

8263

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 30th day of October 9 19 85the following persons were by me united in marriage at Snow Hill, Maryland

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

Ronald Ernest Petri

Age

25

Birthplace

New York

(State)

Groom's

Residence

157 Hounslow Road

Shirley Suffolk

New York

Marital Status

Single

Bride's

Name

Frances I. Colantuono

Age

27

Birthplace

New York

(State)

Bride's

Residence

143 Avondale Dr.

Centereach Suffolk

New York

Marital Status

Single

Relationship to groom if any

Not related

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer

License Date Oct. 30, 85

Clerk of the Circuit Court

Title and Religious Denomination or Office

Snow Hill, Maryland 21863

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

Oct. 30, 1985

office on

License Fee - Resident \$
Non-Resident \$

Warne C. Littleton

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41634

Certificate of Marriage

State of Maryland

LICENSE NO.

8283

Copy for State Department of Health and Mental Hygiene

WORCESTER COUNTY (23)

I Hereby Certify that on the 15th day of November 1985the following persons were by me united in marriage at Snow Hill

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **Graylin A. Collins**Groom's **Box 306**Residence **Stockton Worcester**

Bride's

Name **Chenita A. Harris**Bride's **Box 396**Residence **Onancock Accomack**Age 25 Birthplace Va. (State)Marital Status **Single**Age 20 Birthplace Va. (State)Marital Status **Single**

Relationship to groom if any

Not related

Warne C. Littleton

Name of Officiating Clergyman or Authorized Officer

License Date **Nov. 15 85**

Clerk of the Circuit Court

Title and Religious Denomination or Office

Snow Hill, Md. 21863

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office of Nov. 15, 1985License Fee - Resident \$
Non-Resident \$

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41635

State of Maryland

LICENSE NO.
127506

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of JUNE 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **GARY F. MONROE** Age **28** Birthplace **MD.**
(State)
Groom's
Residence **2701 ROSLYN AVE.** Marital Status **SINGLE**
Bride's
Name **DETRA D. ADDISON** Age **22** Birthplace **MD.**
(State)
Bride's
Residence **3203 ST. LUKES LA. BALTO. CO., MD.** Marital Status **SINGLE**
Relationship to groom if any **NONE**

P. EDWARD KENNY, JR.

Name of Officiating Clergy or Authorized Officer

PASTOR- ALL SAINTS CATHOLIC CHURCH

Title and Religious Denomination or Office

4408 LIBERTY HGTS. AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

JUNE 26 85

jw

License Fee \$ 25⁰⁰

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41636

LICENSE NO.

129060

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 28th day of SEPTEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name WILLIAM EDWARD THOMAS, JR.Age 25 Birthplace OHIO
(State)Groom's
Residence 1519 BOLTON STREET

Marital Status SINGLE

Bride's
Name MILDRED ANN KNIGHTAge 24 Birthplace WASH., D.C.
(State)Bride's
Residence 1519 BOLTON STREET

Marital Status SINGLE

Relationship to groom if any NONE

JEREMIAH G. WILLIAMS

Name of Officiating Clergyman or Authorized Officer

License Date AUG. 30 85

PASTOR- STRAWBRIDGE UNITED METH. CHURCH

Title and Religious Denomination or Office

tt

3407 MILFORD AVE.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41637

State of Maryland

LICENSE NO.

129167

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 19th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name CHARLES H. HARRIS, SR.

Age 39 Birthplace MD.

(State)

Groom's Residence 169 N. MONASTERY AVE.

Marital Status

DIVORCED

Bride's Name SYLVIA M. LYLES

Age 32 Birthplace PA.

(State)

Bride's Residence 169 N. MONASTERY AVE.

Marital Status

SINGLE

Relationship to groom if any NONE

NORRIS A. DICKERSON

Name of Officiating Clergyman or Authorized Officer

MINISTER- BAPTIST

Title and Religious Denomination or Office

201 N. MONASTERY AVE.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41638

State of Maryland

 LICENSE NO.
130210

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
I Hereby Certify that on the 26th day of OCTOBER 19 85

 the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's Name **ELLERY B QUEEN**
 Groom's Residence **3604 FOREST PK AVE**

 Age **38** Birthplace **MD.**
(State)
 Marital Status **DIVORCED**

 Bride's Name **SHARON E HOWARD**
 Bride's Residence **1305 W MADISON ST**

 Age **31** Birthplace **MD**
(State)
 Marital Status **SINGLE**

Relationship to groom if any

NONE
GILBERT QUEEN

Name of Officiating Clergy or Authorized Officer

 License Date **OCT. 23 85**
GREATER CHURCH OF JESUS CHRIST APOSTOLIC

Title and Religious Denomination or Office

12s. STOCKTON ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

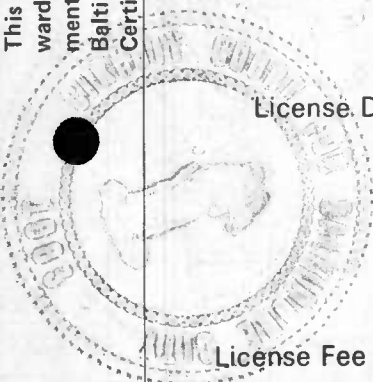
office on

 NOV 4 1985
SAUNDRA E. BANKS, CLERK

 License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41639

State of Maryland

LICENSE NO.

130142

Copy for State Department of Health and Mental Hygiene

BALTIMORE-CITY (30)

I Hereby Certify that on the 26th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **REGINALD D. WASHINGTON**

Age **27** Birthplace **MD.**
(State)

Groom's Residence **4541 LANIER AVE.**

Marital Status **SINGLE**

Bride's Name **SHARON Y. SMITH**

Age **25** Birthplace **MD.**
(State)

Bride's Residence **3935 ANNELLEN RD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

SYLVESTER GAINES, SR.

Name of Officiating Clergy or Authorized Officer

MINISTER- EASTERN UNITED METH. CHURCH

Title and Religious Denomination or Office

1711 LAKESIDE AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and for-
warded to the Division of Vital Records, State Depart-
ment of Health and Mental Hygiene, 201 W. Preston Street,
Baltimore, MD 21201, upon receipt of page 3, copy of
Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41640

LICENSE NO.

129821

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26th day of OCTOBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD L. BELL JR** Age **23** Birthplace **TX.**
Groom's Residence **PSC1 BOX 1692, P.G. CO., MD.** Marital Status **SINGLE**
Bride's Name **MARGARITA RIDGELL** Age **22** Birthplace **MD.**
Bride's Residence **3212 MILFORD AVE. BALTO.CO., MD.** Marital Status **SINGLE**
Relationship to groom if any **NONE**

License Date **OCT 2 85**

JW

ERNEST HUMPHREY

Name of Officiating Clergy or Authorized Officer

PASTOR- FIRST CHRISTIAN COMM. BAPT. CHURCH

Title and Religious Denomination or Office

3734 MILFORD AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41641

LICENSE NO.

130077

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26th day of Oct 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WADE LAWRENCE JOHNSON**Age **23**Birthplace **MD.**
(State)Groom's** Residence **952 ARGONNE DR.**Marital Status **SINGLE**Bride's Name **THEA L. BLOODWORTH**Age **21**Birthplace **SAN DIEGO**
(State)Bride's Residence **952 ARGONNE DR.,**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT 18 85**Albert Queen

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

12 S Stockton ST

Address of Clergy or Authorized Officer

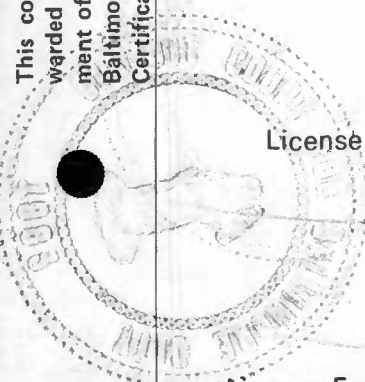
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
office on 11-1-85**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41642

Certificate of Marriage

State of Maryland

LICENSE NO.

130084

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 19th day of Oct 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **NORMAN GEORGE OTTO, JR**Age **27**Birthplace **MD.**
(State)Groom's Residence **3408 SCHAEFER DR. HAMPSTEAD, MD**Marital Status **SINGLE**Bride's Name **THERESA DERARD STEIN**Age **25** Birthplace **MD.**
(State)Bride's Residence **915 STILES ST. 21202**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT 17 85**

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-1-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41643

LICENSE NO.

130125

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 25 day of Oct 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **PHILIP B. FEDEROWICZ**

Age **25** Birthplace **MD.**
(State)

Groom's
Residence **511 N. LINWOOD AV.**

Marital Status **SINGLE**

Bride's
Name **THERESA M. MUTH**

Age **24** Birthplace **MD.**
(State)

Bride's
Residence **121 N. KENWOOD AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 18 85**

John Daelzenbach
Name of Officiating Clergy or Authorized Officer

Catholic Priest
Title and Religious Denomination or Office

2638 E. Balt. St.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

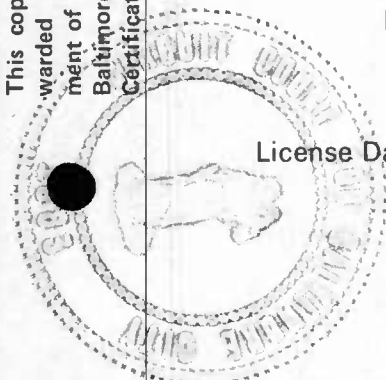
office on

11-1-85
SANDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41644

State of Maryland

LICENSE NO.

130236

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 27 day of Oct 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT FRANK SCARDINA**Age **22** Birthplace **MD.**
(State)Groom's Residence **992 SHORELAND DR. A.A. CO., MD.**Marital Status **SINGLE**Bride's Name **LISA MARIE LINSENMEYER**Age **21** Birthplace **MD.**
(State)Bride's Residence **904 SILVER MAPLE CT. A.A. CO., MD.**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **OCT. 25****85**

tt

Brendan Cox

Name of Officiating Clergy or Authorized Officer

Catholic Priest

Title and Religious Denomination or Office

4708 Providence ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-1-85**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature - Clerk of the Court

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2

85-41645

Certificate of Marriage

State of Maryland

LICENSE NO.

130221

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 27th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

DAVID A PAUL

Age 37

Birthplace

MD.

(State)

Groom's
Residence

3956 CLOVERHILL RD

Marital Status

SINGLE

Bride's
Name

JANIS I STROUP

Age 33

Birthplace

PA

(State)

Bride's
Residence

3956 CLOVERHILL RD

Marital Status

SINGLE

Relationship to groom if any

NONE

ALVIN DONALD

Name of Officiating Clergy or Authorized Officer

License Date OCT. 25 85

CANTOR- TEMPLE EMANUEL JEWISH

Title and Religious Denomination or Office

6605 PARK HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

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2

85-41646

Certificate of Marriage

State of Maryland

LICENSE NO.
130192

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 24th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name GEORGE WASHINGTON JRAge 34 Birthplace MD.
(State)Groom's Residence 501 E PRESTON STMarital Status DIVORCEDBride's Name VIRGINIA E JONESAge 32 Birthplace MD.
(State)Bride's Residence 501 E PRESTON STMarital Status SINGLE
NONE

Relationship to groom if any

BERLIN WHYE

Name of Officiating Clergy or Authorized Officer

License Date OCT. 23 85PASTOR- PROGRESSIVE FREE WILL BAPT.CHURCH

Title and Religious Denomination or Office

3925 DOLFIELD AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

tt

OCT 31 1985

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2

85-41647

Certificate of Marriage

State of Maryland

LICENSE NO.

130182

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOHN E WITT JR

Age 22

Birthplace

MD.

(State)

Groom's
Residence

1178 SARGENT ST

Marital Status

SINGLE

Bride's
Name

KRISTY J HARDESTY

Age 17

Birthplace

MD.

(State)

Bride's
Residence

1178 SARGENT ST

Marital Status

SINGLE

Relationship to groom if any

NONE

WILLIAM G. BROWN

Name of Officiating Clergy or Authorized Officer

PASTOR- MONROE ST. UNITED METH. CHURCH

Title and Religious Denomination or Office

2434 CHRISTIAN ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date OCT. 21 85License Fee \$ 25.00

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2

Certificate of Marriage

85-41648

State of Maryland

LICENSE NO.

130160

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|----------------------------|----------------|-----------------|------------|-----------------------|
| Groom's Name | PAUL J. LOOMIS | Age | 31 | Birthplace | MD. (State) |
| Groom's Residence | 4221 MARY AVE. | Marital Status | DIVORCED | | |
| Bride's Name | THERESA M. CHRISTY | Age | 20 | Birthplace | MD. (State) |
| Bride's Residence | 4702 HAZELWOOD AVE. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

License Date **OCT. 21, 85**

BRUCE M. KELLEY

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. LUKE EV. LUTHERAN CHURCH

Title and Religious Denomination or Office

7001 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

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2

Certificate of Marriage

85-41649

State of Maryland

LICENSE NO.

130241

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 25th day of OCTOBER 1985the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

GERALD LEE POWELL

Age 33Birthplace MD.

(State)

Groom's
Residence

3606 COTTAGE AVENUE

Marital Status

DIVORCED

Bride's
Name

JACQUELINE Y. BURLEY

Age 37Birthplace VA.

(State)

Bride's
Residence

3606 COTTAGE AVENUE

Marital Status

DIVORCED

Relationship to groom if any NONE

DALE G. RENLUND

Name of Officiating Clergy or Authorized Officer

BISHOP- CHURCH OF JESUS CHRIST OF LATTER DAY

Title and Religious Denomination or Office

SAINTS

604 N. BOND ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

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2

Certificate of Marriage

85-41650

State of Maryland

LICENSE NO.

130148

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MICHAEL JEFFREY PONDER Age 20 Birthplace MD.
(State)Groom's Residence 404 HILLVIEW AVE. A.A. CO., MD. Marital Status SINGLEBride's Name CINDY THERESA CORNELIUS Age 19 Birthplace MD.
(State)Bride's Residence 116 JUNPITER CT. A.A. CO., MD. Marital Status SINGLERelationship to groom if any NONEJOSEPH KRACH

Name of Officiating Clergy or Authorized Officer

License Date OCT 21 1985ASSOC. PASTOR- ROSE OF LIMA ROMAN CATH.

Title and Religious Denomination or Office

CHURCHJW3803 4th ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

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2

Certificate of Marriage
State of Maryland

85-41651

LICENSE NO.

130097

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 24th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JEFFREY S FINCH

Age 20

Birthplace MD.

Groom's
Residence

2903 LAKE BROOK CIRCLE

Marital Status

(State)
SINGLE

Bride's
Name

MARYSOL Y VIRELLA

19

N.Y.

Bride's
Residence

2903 LAKE BROOK CIRCLE

Age Birthplace

SINGLE

Marital Status

NONE

Relationship to groom if any

M. J. MATTHEWS

Name of Officiating Clergy or Authorized Officer

License Date

OCT 17 1985**PASTOR- ZION MIRACLE TEMPLE, INC.**

Title and Religious Denomination or Office

JW**1623 THOMAS AVENUE**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$

55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41652

State of Maryland

LICENSE NO.

129985

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

MARK T MAURER

Age 18Birthplace MD
(State)Groom's
Residence

1616 E FORT AVE

Marital Status SINGLEBride's
Name

JOYCE A NELSON

Age 19 Birthplace MD
(State)Bride's
Residence

1616 E FORT AVE

Marital Status SINGLE

Relationship to groom if any

NONE

RICHARD E. PARKS

Name of Officiating Clergy or Authorized Officer

License Date

OCT 15 1985

PRIEST- HOLY CROSS CHURCH

Title and Religious Denomination or Office

110 E. WEST ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on

OCT 31 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and for-
warded to the Division of Vital Records, State Depart-
ment of Health and Mental Hygiene, 201 W. Preston Street,
Baltimore, MD 21201, upon receipt of page 3, copy of
Certificate for Clerk of Court.

2

85-41653

Certificate of Marriage

State of Maryland

LICENSE NO.

129870

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

MICHAEL R DEASEL

Age 26

Birthplace

MD.

(State)

Groom's
Residence

3316 GARNET RD BALTO CO MD

Marital Status

SINGLE

Bride's
Name

GLORIA J KATZENBERGER

Age 23

Birthplace

MD.

(State)

Bride's
Residence

10020 DUNBRIDGE CIRCLE BALTO CO MD

Marital Status

SINGLE

NONE

Relationship to groom if any

JOHN T. WIELEBSKI

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC CHURCH

Title and Religious Denomination or Office

5310 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

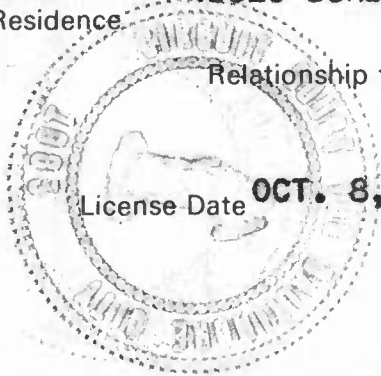
OCT 31 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41654

LICENSE NO.

129714

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 19th day of OCTOBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|-------------------------|----------------|-----------------|------------|-----------------------|
| Groom's Name | VERMONT J. DEMAR | Age | 36 | Birthplace | MD. (State) |
| Groom's Residence | 111 UPMANOR RD. | Marital Status | DIVORCED | | |
| Bride's Name | SANDRA BROOKS | Age | 34 | Birthplace | MD. (State) |
| Bride's Residence | 111 UPMANOR RD. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

License Date

OCT 9 85

JW

WALTER THOMAS

Name of Officiating Clergy or Authorized Officer

MINISTER- BAPTIST

Title and Religious Denomination or Office

502 CATHEDRAL ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41655

State of Maryland

LICENSE NO.
129302

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 25th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|---------------------|----------------|--------|------------|-----|
| Groom's Name | JERRY R. GIBBS | Age | 35 | Birthplace | MD. |
| Groom's Residence | 2440 DRUID PARK DR. | Marital Status | SINGLE | | |
| Bride's Name | REGINA E. BROOKS | Age | 32 | Birthplace | MD. |
| Bride's Residence | 3006 SPAULDING AVE. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

CYNTHIA B. JONES

Name of Officiating Clergyman or Authorized Officer

MINISTER- BAPTIST

Title and Religious Denomination or Office

3806 TWIN LAKES CT.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41656

State of Maryland

LICENSE NO.
129263

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 11th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

RODERICK E ROBERTS JR

Age 23

Birthplace

MD.

(State)

Groom's
Residence

2402 W LAFAYETTE AVE

Marital Status

SINGLE

Bride's
Name

LYNDA G GORDON

Age 22

Birthplace

MD.

(State)

Bride's
Residence

4 ST CHARLES RD A.A.CO.MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

R. JONES

Name of Officiating Clergyman or Authorized Officer

PASTOR- GREATER HOPE

Title and Religious Denomination or Office

4500 SPRINGDALE AVE.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41657

State of Maryland

LICENSE NO.

130174

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM BERNARD LONG**

Age **20**

Birthplace

S.C.
(State)

Groom's Residence **1734 MORELAND AV.**

Marital Status **SINGLE**

Bride's Name **CARMELA ANN WRIGHT**

Age **18**

Birthplace

MD.
(State)

Bride's Residence **2525 MAISEL ST.**

Marital Status **SINGLE**

Relationship to groom if any

NONE**STUART C. TURNER**

Name of Officiating Clergy or Authorized Officer

ASSOC. MINISTER- ST. JOHN BAPTIST

Title and Religious Denomination or Office

2418 W. ROGERS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41658

State of Maryland

 LICENSE NO.
130290

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
I Hereby Certify that on the 31st day of OCTOBER 19 85

 the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's Name **EDDIE NEWBY**

 Age **89** Birthplace **VA**
 (State)

 Groom's Residence **2409 SHIRLEY AVE**

 Marital Status **WIDOWER**

 Bride's Name **ANNIE L HARRIS**

 Age **79** Birthplace **VA**
 (State)

 Bride's Residence **1722 ASHBURTON ST**

 Marital Status **SINGLE**

Relationship to groom if any

NONE
DONALD V. ADAMS

Name of Officiating Clergy or Authorized Officer

EVANGILIST

License Date

OCT-30 85

Title and Religious Denomination or Office

4824 WILLIAM AVE,

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 5 1985

 License Fee \$ 25.00
SAMUEL E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41659

Certificate of Marriage

State of Maryland

LICENSE NO.

129855

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of OCTOBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JIMMY L. BILLUPS

Age **20** Birthplace

GA.

(State)

Groom's

1328 E. LAFAYETTE AVE.

Residence

Marital Status

SINGLE

Bride's

CHARNELL L. MC CRAE

Name

Age **18** Birthplace

WASH.D.C.

(State)

Bride's

1236 N. BROADWAY

Residence

Marital Status

SINGLE

Relationship to groom if any

NONE

WILLIE S. CHAMBERS

Name of Officiating Clergy or Authorized Officer

PASTOR-NEW ANTIOCH BAPT. CHURCH

Title and Religious Denomination or Office

1325 MAPLE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985
SABINDA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **OCT 4 85**
JW

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41660

State of Maryland

LICENSE NO.

130143

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26th day of OCTOBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES DAVID WHITAKER, JR**

Age **20**

Birthplace **MD.**
(State)

Groom's Residence **3915 EMMART AV.**

Marital Status **SINGLE**

Bride's Name **TERRI FERGUSON**

Age **19**

Birthplace **MD.**
(State)

Bride's Residence **2531 DENISON ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

DAVID W. SPANN, SR.

Name of Officiating Clergy or Authorized Officer

PASTOR- GREATER REMNANT C.O.G.T.C.

Title and Religious Denomination or Office

5023 GWYNN OAK AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **OCT. 22,**

85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41661

State of Maryland

LICENSE NO.

130217

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26th day of October 19 85

the following persons were by me united in marriage at

Baltimore, md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JAMES

GALLMAN

Age

30

Birthplace

MD.

(State)

Groom's
Residence

905 N. CHESTER ST.

Marital Status

SINGLE

Bride's
Name

GERALDINE CORBETT

Age

28

Birthplace

MD.

(State)

Bride's
Residence

905 N. CHESTER ST.

Marital Status

SINGLE

Relationship to groom if any

NONE

John Perkins

Name of Officiating Clergy or Authorized Officer

Shining Star Baptist Church

Title and Religious Denomination or Office

1503 E. North Ave Balto, md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 0 7 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded, to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41662

LICENSE NO.

129881

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26th day of October 1985

the following persons were by me united in marriage at

Baltimore, Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

JOHN

D.

MEDLEY

Age

29

Birthplace

TX.

(State)

Groom's Residence

1004

DARTMOUTH

RD.

Marital Status

SINGLE

Bride's Name

CHRISTY

L.

KUNENETZ

Age

29

Birthplace

MD.

(State)

Bride's Residence

6401 BLENHEIM

RD.

BALTO.CO., MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT. 8,

85

Name of Officiating Clergy or Authorized Officer

Fr. Myron D. Manjuk

Title and Religious Denomination or Office

Priest - Orthodox Church in America

Address of Clergy or Authorized Officer

3107 Berkshire Rd, Balto, Md 21214

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 07 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41663

LICENSE NO.

129810

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26 day of October 19 85

the following persons were by me united in marriage at

Baltimore, Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **EDWARD H. DAVIS, 4TH.**Age **22** Birthplace **MD.**
(State)

Groom's

Residence **845 N. MONFORD AVE.**Marital Status **SINGLE**

Bride's

Name **MARGARET W. SMITH**Age **21** Birthplace **VA.**
(State)

Bride's

Residence **2701 THE ALAMEDA**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT. 2,****85**Rev. Ralph D. White

Name of Officiating Clergy or Authorized Officer

Pastor - New Friendship Baptist Church

Title and Religious Denomination of Office

P. O. B of 1016

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41664

LICENSE NO.
 129999

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 19th day of OCTOBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RAY GARNETT SIMMONS**

Age **27** Birthplace **MD.**
 (State)

Groom's Residence **4 DUKE OF WINDSOR**

Marital Status **SINGLE**

Bride's Name **SHIRLENE OLIVIA BRAXTON**

Age **25** Birthplace **MD.**
 (State)

Bride's Residence **2910 CARVER ROAD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

HENRY SIMON

Name of Officiating Clergy or Authorized Officer

BAPTIST

Title and Religious Denomination or Office

823 CHERRY HILL ROAD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41665

LICENSE NO.
 130057

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 17th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT L. DANIEL, JR.**

Age **29** Birthplace **N. C.**
 (State)

Groom's Residence **1625 BOLTON STREET**

Marital Status **DIVORCED**

Bride's Name **DEBORAH M. RICKS**

Age **28** Birthplace **VA.**
 (State)

Bride's Residence **1625 BOLTON STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

EMMETT. C. BURNS

PASTOR, RISING SUN FIRST BAPTIST CHURCH

License Date **OCT. 17 85**

Title and Religious Denomination or Office

3600 OAK AVE. BALTIMORE, MD. 21207

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41666

 LICENSE NO.
129820

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
I Hereby Certify that on the 28th day of OCTOBER 19 85

 the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|-------------------|----------------|--------|------------------------|------|
| Groom's Name | OSCAR R. RESEK | Age | 37 | Birthplace | N.Y. |
| | | | | <small>(State)</small> | |
| Groom's Residence | 954 FOREST ST. | Marital Status | SINGLE | | |
| Bride's Name | LORI ANN WHITMAN | Age | 27 | Birthplace | CT. |
| | | | | <small>(State)</small> | |
| Bride's Residence | 2901 GEORGIA AVE. | Marital Status | SINGLE | | |

Relationship to groom if any NONELicense Date OCT 28 85

JW

THEODORE A. WEBB

Name of Officiating Clergy or Authorized Officer

CLERGY- UNITARIAN UNIVERLISTIC

Title and Religious Denomination or Office

1 WEST HAMILTON ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41667

LICENSE NO.
 129923

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 12th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|---------------------------------------|----------------|---------------|------------|--------------------------|
| Groom's Name | DANIEL THOMAS | Age | 27 | Birthplace | KANSAS (State) |
| Groom's Residence | 29 S CALHOUN ST | Marital Status | SINGLE | | |
| Bride's Name | KIM CAROL VISMALE | Age | 28 | Birthplace | N.Y. (State) |
| Bride's Residence | 2003 FITZWARREN PL BALTO CO MD | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

AGNES N. FIELDS

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 7 85**

BAPTIST

Title and Religious Denomination or Office

2508 WOODLAND AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 7 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

tt

2

Certificate of Marriage

85-41668

State of Maryland

LICENSE NO.

51754

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

I Hereby Certify that on the 30th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM E. BLACKWELL**

Age **43** Birthplace **VIRGINIA**
(State)

Groom's Residence **421 MOSHER STREET**

Marital Status **DIVORCED**

Bride's Name **MARION HUGHES MC GASKEY**

Age **43** Birthplace **VIRGINIA**
(State)

Bride's Residence **421 MOSHER STREET**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

THEODORE F. MCPHERSON

PASTOR CORDTOWN CIRCUIT AME CHURCH

6827 ALTER STREET. 21207

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

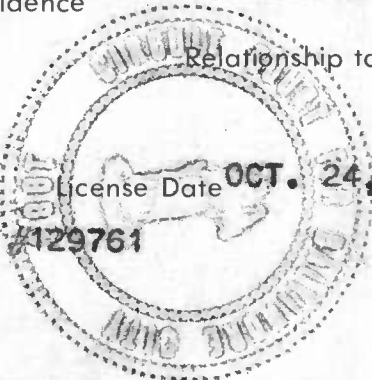
office on

NOV 1 4 1985

Paul T. Chester

Signature-Clerk of the Court

License Fee - Resident \$
Non-Resident \$



2

Certificate of Marriage

85-41669

State of Maryland

LICENSE NO.

130235

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26 day of Oct. 1985the following persons were by me united in marriage at Baltimore, Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

13

Groom's
Name

FRANK CLARK, JR.

Age 29 Birthplace S. C.
(State)Groom's
Residence

250 OAK AVENUE

Marital Status SINGLE

Bride's
Name

SUSAN LOUISE DINGLE

Age 43 Birthplace S. C.
(State)

Bride's

Residence

250 OAK AVENUE

Marital Status SINGLE

Relationship to groom if any NONE

License Date OCT. 24 85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41670

LICENSE NO.

130056

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 25th day of OCTOBER 19 85

the following persons were by me united in marriage at LINTHICUM, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **STEPHEN MICHAEL MONTGOMERY**

Age **22** Birthplace **MD.**
(State)

Groom's Residence **202 SOUTH BRIDGE DR. GLEN BURNIE, MD**

Marital Status **SINGLE**

Bride's Name **LEILANI MARIE BLACKWELL**

Age **20** Birthplace **MD.**
(State)

Bride's Residence **202 SOUTH BRIDGE DR. GLEN BURNIE, MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

BARNEY L. LYON

Name of Officiating Clergy or Authorized Officer

PASTOR- CHESAPEAKE BAPT. CHURCH

Title and Religious Denomination or Office

105 N. CAMP MEADE RD,

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985
SAUNDRA E. BANKS, CLERK

Signature Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

12:03

2

85-41671

Certificate of Marriage

State of Maryland

LICENSE NO.

129858

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 6th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARK A. BUTLER**Age **26** Birthplace **MD.**
(State)Groom's Residence **2502 EUTAW PL. APT. 6A**Marital Status **SINGLE**Bride's Name **LINDA P. WRIGHT**Age **24** Birthplace **MD.**
(State)Bride's Residence **2502 EUTAW PL. APT. 6A**Marital Status **SINGLE**Relationship to groom if any **NONE****GEORGE R. ALLEN**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 4 85****MINISTER - ST. PAUL A.M. CHURCH**

Title and Religious Denomination or Office

5906 LEEWOOD AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41672

LICENSE NO.
 130385

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY C WATTERS**
 Groom's Residence **1909 PEARLMAN PL**

Age **26** Birthplace **MD.**
(State)
 Marital Status **SINGLE**

Bride's Name **DOROTHY V STEWART**
 Bride's Residence **4219 N FORT AVE**

Age **26** Birthplace **MD.**
(State)
 Marital Status **SINGLE**

Relationship to groom if any **NONE**

CHARLES E. FLETCHER

Name of Officiating Clergy or Authorized Officer

PASTOR - PENTECOSTAL BAPTIST CHURCH

Title and Religious Denomination or Office

1615 POPLAR GROVE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 4,**

85

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41673

State of Maryland

LICENSE NO.

130330

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **ANDREW ALEXANDER HENDRICKS, JR**Age **26** Birthplace **ALABAMA**
(State)Groom's
Residence **3633 DOLFIELD AV.**Marital Status **SINGLE**Bride's
Name **LYNNETTE MARTINA MILBURN**Age **22** Birthplace **MD**
(State)Bride's
Residence **8 PHLOX CIRCLE. BALTO.CO., MD**Marital Status **SINGLE**Relationship to groom if any **NONE****LORENZO GRAVES**

Name of Officiating Clergy or Authorized Officer

PASTOR- CALVARY BAPTIST CHURCH

Title and Religious Denomination or Office

3502 CARSDALE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25 00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41674

State of Maryland

LICENSE NO.
130328

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD S. KELLY**
 Groom's Residence **4400 CHALET COURT**
 Bride's Name **MARIAN C. KUS**
 Bride's Residence **5510 KNELL AVENUE**

Age **62** Birthplace **MASS.**
 (State)
 Marital Status **SINGLE**
 Age **57** Birthplace **MD.**
 (State)
 Marital Status **SINGLE**

Relationship to groom if any **NONE****HENRY C. MILKOWSKI**

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. WENCESLAUS

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985
SAUNDRA E. BANKS, CLERK
Signature - Clerk of the CourtLicense Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41675

LICENSE NO.

130180

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **MICHAEL J ROBY**Age **27** Birthplace **MD.**
(State)Groom's
Residence **7228 STRATTON WAY BALTO CO MD**Marital Status **DIVORCED**Bride's
Name **MARY H FRIESNER**Age **23** Birthplace **MD.**
(State)Bride's
Residence **8 DEBHAMAN CT BALTO CO MD**Marital Status **SINGLE**

Relationship to groom if any

NONE**DONALD E. BENDEWALD**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 7** **85****PASTOR- BETHLEHEM LUTHERAN CHURCH**

Title and Religious Denomination or Office

4815 HAMILTON AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985License Fee \$ **25.00****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41676

 LICENSE NO.
130146

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
I Hereby Certify that on the 16th day of NOVEMBER 19 85

 the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**HOWARD L. HARTMAN**Age **62**

Birthplace

MD.
(State)Groom's
Residence**106 N GLOVER ST**

Marital Status

SINGLEBride's
Name**ANNETTE HARRER**Age **69**

Birthplace

MD.
(State)Bride's
Residence**158 N CURLEY ST**

Marital Status

WIDOW

Relationship to groom if any

NONE**JOHN DIETZENBACH**

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

2638 E. BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41677

Certificate of Marriage

State of Maryland

LICENSE NO.

130016

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RAYNARD TERRANCE BOLLING**Age **23** Birthplace **MD.**
(State)Groom's Residence **4318 ELDERONE AVENUE**Marital Status **SINGLE**Bride's Name **BRENDA ANN VENABLE**Age **23** Birthplace **MD.**
(State)Bride's Residence **31 N. CULVER STREET**Marital Status **SINGLE**Relationship to groom if any **NONE****B.A. DAWKINS**

Name of Officiating Clergy or Authorized Officer

PASTOR- PROGRESSIVE 1st BAPTIST

Title and Religious Denomination or Office

9720 EUSLICO RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **OCT. 14 85**

tt

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41678

State of Maryland

LICENSE NO.
126697

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DENNIS EUGENE SCHELL** Age **38** Birthplace **PENNSYLVANIA**
(State)

Groom's Residence **9120 PINEY BRANCH RD., MONTGOMERY CO.** Marital Status **SINGLE**

Bride's Name **LESLIE ALICE HEIDERMAN** Age **37** Birthplace **MARYLAND**
(State)

Bride's Residence **407 ORCHARD RD., A.A. CO., MD** Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOSEPH P. LETTRICH

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. JOHN

Title and Religious Denomination or Office

GLEN BURNIE, MD. 21061

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **JULY 3, 85**

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41679

Certificate of Marriage

State of Maryland

LICENSE NO.

129966

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85BALTIMORE CITY

the following persons were by me united in marriage at

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN G ROCKER**Age **21**Birthplace **MD.**

(State)

Groom's Residence **14 COUNCILMAN AVE BALTO CO MD**

Marital Status

SINGLEBride's Name **ELISE A RICE**Age **19**Birthplace **MD.**

(State)

Bride's Residence **5502 GERLAND AVE**

Marital Status

SINGLE**NONE**

Relationship to groom if any

LAWRENCE J. GESY

Name of Officiating Clergy or Authorized Officer

License Date

OCT 9 85**ASSOCIATE PASTOR- OUR LADY OF VICTORY**

Title and Religious Denomination or Office

4414 WILKENS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 21 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41680

Certificate of Marriage

State of Maryland

LICENSE NO.

130206

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1st day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOHN P CEFALU

Age 36Birthplace MD.
(State)Groom's
Residence

2709 CHESTERFIELD AVE

Marital Status

DIVORCEDBride's
Name

HELYNE A FOX

Age 35Birthplace WASH DC
(State)Bride's
Residence

2709 CHESTERFIELD AVE

Marital Status

DIVORCED

Relationship to groom if any

NONELicense Date OCT 23 85ROBERT T. WOODWORTH

Name of Officiating Clergy or Authorized Officer

PASTOR - CHRIST & COUNTRY CHURCH

Title and Religious Denomination or Office

6020 OLD HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41681

LICENSE NO.

130389

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

CLARENCE H MILLER

Age 33

Birthplace

N CAR

(State)

Groom's Residence

1028 EVESHAM AVE

Marital Status

DIVORCED

Bride's Name

RUTH ANN MC CARGISH

Age 34 Birthplace

W VA

(State)

Bride's Residence

1031 EVESHAM AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

EDGAR T. HUTTON

Name of Officiating Clergy or Authorized Officer

MINISTER- NORTHSIDE BAPTIST CHURCH

Title and Religious Denomination or Office

1100 E. NORTHERN PKWY.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 21 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41682

State of Maryland

LICENSE NO.

130452

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FRANK A DE MASI**Age **64** Birthplace **N.Y.**
(State)Groom's Residence **2607 KENTUCKY AVE**Marital Status **WIDOWER**Bride's Name **ANNE C SHIMANEK**Age **60** Birthplace **VA**
(State)Bride's Residence **2607 KENTUCKY AVE**Marital Status **WIDOW**
NONE

Relationship to groom if any

TIMOTHY PASEK

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 12 85****PRIEST-ROMAN CATHOLIC**

Title and Religious Denomination or Office

2854 BRENDAN AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**NOV 21 1985**
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41683

Certificate of Marriage

State of Maryland

LICENSE NO.

130483

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT KEVIN BECKER**Age **21** Birthplace **MD.**
(State)Groom's Residence **5804 MOORES RUN COURT**Marital Status **SINGLE**Bride's Name **STEPHANIE LYNN CANBY**Age **18** Birthplace **MD.**
(State)Bride's Residence **9206 SWIVEN PL. BALTO. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE****WILLIAM P. FOLEY**

Name of Officiating Clergy or Authorized Officer

PRIEST — ROMAN CATHOLIC

Title and Religious Denomination or Office

4414 FRANKFORD AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 21 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41684

Certificate of Marriage

State of Maryland

LICENSE NO.

129773

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 3 day of November 1985

the following persons were by me united in marriage at

Baltimore, Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN FITZGERALD GREENE**Age **21** Birthplace **MD.**
(State)Groom's Residence **1615 N. CAROLINE ST.**Marital Status **SINGLE**Bride's Name **ROSE MARIA BANKS**Age **22** Birthplace **MD.**
(State)Bride's Residence **1615 N. CAROLINE ST.**Marital Status **SINGLE**Relationship to groom if any **NONE**Rev. Arthur H. Banks
Name of Officiating Clergy or Authorized OfficerLicense Date **SEPT. 30** **85**Minister - Holiness
Title and Religious Denomination or Office2412 North Ave.
Address of Clergy or Authorized Officer

tt

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41685

Certificate of Marriage

State of Maryland

LICENSE NO.

130042

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23 day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DOUGLAS FARBMAN** Age **27** Birthplace **MD.**
(State)

Groom's Residence **30 STOCKMILL RD. BALTO. CO., MD.** Marital Status **SINGLE**

Bride's Name **ANDREA GOREN** Age **23** Birthplace **MD.**
(State)

Bride's Residence **30 STOCKMILL RD. BALTO. CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 17 85****JOEL H. ZAIMAN**

Name of Officiating Clergy or Authorized Officer

RABBI- JEWISH

Title and Religious Denomination or Office

8100 STEVENSON RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 05.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41686

Certificate of Marriage

State of Maryland

LICENSE NO.

130320

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM J ZUPANCIC**Age **43** Birthplace **OHIO**
(State)Groom's Residence **2109 CIDER MILL RD BALTO CO MD**Marital Status **SINGLE**Bride's Name **JILL W GRIMMER**Age **39** Birthplace **MD.**
(State)Bride's Residence **2109 CIDER MILL RD BALTO CO MD**Marital Status **SINGLE**
NONE

Relationship to groom if any

STEVEN C. TICKNOR

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 31** **85****PRIEST- ROMAN CATHOLIC**

Title and Religious Denomination or Office

714 MYRTLE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41687

LICENSE NO.

130601

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 24th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ELMER E. SMITH**

Age **59** Birthplace **MD.**
(State)

Groom's Residence **9811 LANGS RD. BALTO.CO.,MD.**

Marital Status **WIDOWER**

Bride's Name **BETTY D. SURRATT**

Age **58** Birthplace **MD.**
(State)

Bride's Residence **9811 LANGS RD. BALTO.CO.,MD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

SAMUEL B. HAYNIE

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 18,**

85 PASTOR- EAST BALTIMORE CHURCH OF GOD

Title and Religious Denomination or Office

2043 EAST BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985

License Fee \$ **25.00**

SAUNDRA E. BANKS, CLERK
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41688

State of Maryland

LICENSE NO.

130627

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|--|----------------|---------------|------------|------------------|
| Groom's Name | BRIAN DOUGLAS RICHARDSON | Age | 25 | Birthplace | MD. |
| Groom's Residence | 7 BEXLEIGH CT. BALTO.CO.,MD. | Marital Status | SINGLE | | |
| Bride's Name | JANICE MARIE GOULART | Age | 24 | Birthplace | WASH.D.C. |
| Bride's Residence | P.O. BOX 468 QUEEN ANNE CO.,MD. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

DAVID SCHELL

Name of Officiating Clergy or Authorized Officer

PASTOR- S B C

Title and Religious Denomination or Office

2507 LAMPOST LANE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985

SAUNDRA E. BARKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41689

State of Maryland

LICENSE NO.

129504

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of November 19 85

the following persons were by me united in marriage at Baltimore, md
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **JAMES T. PAYNE**Age **23** Birthplace **NE.**

(State)

Groom's

Residence **4105 AUDREY AVENUE**Marital Status **SINGLE**

Bride's

Name **CATHERINE LEE SCHULTZ**Age **24** Birthplace **MD.**

(State)

Bride's

Residence **4105 AUDREY AVENUE**Marital Status **SINGLE**

methodist

Relationship to groom if any

NONE

License Date

SEPT 18

85

Name of Officiating Clergyman or Authorized Officer

Rev. Mark L. Boling
Pastor Brooklyn Methodist Ch.

Title and Religious Denomination or Office

401 Pontiac Ave - Baltimore.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee - Resident **\$25.00**
Non-Resident \$

SAUNDRA E. BANKS, CLERK

Signature-Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41690

State of Maryland

LICENSE NO.

130304

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LEON NATHANIEL STANLEY, JR.** Age **28** Birthplace **MD.**
 (State)
 Groom's Residence **5606 MC CLEAN BLVD.** Marital Status **SINGLE**
 Bride's Name **BARBARA JEAN PERRY** Age **34** Birthplace **MD.**
 (State)
 Bride's Residence **5606 MC CLEAN BLVD.** Marital Status **DIVORCED**
 Relationship to groom if any **NONE**

LEVESTER WADDY

Name of Officiating Clergy or Authorized Officer

PASTOR- XHRIST TEMPLE CHURCH

Title and Religious Denomination or Office

2117 PENNSYLVANIA AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41691

LICENSE NO.
 130511

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 19th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **NATHANIEL C. JACKSON**

Age **35** Birthplace **MD.**
(State)

Groom's Residence **721 GLENWOOD AV.**

Marital Status **SINGLE**

Bride's Name **BARBARA LEE WHITE**

Age **46** Birthplace **MD.**
(State)

Bride's Residence **1721 W. LEXINGTON ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

ERNEST WOOTEN, JR.

Name of Officiating Clergy or Authorized Officer

PASTOR- SILOOM BAPTIST CHURCH

Title and Religious Denomination or Office

4116 NORFOLK AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

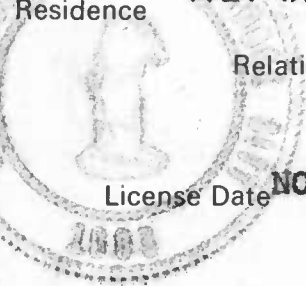
office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41692

Certificate of Marriage

State of Maryland

LICENSE NO.
129720

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.Groom's Name **JOHN THOMAS FITZPATRICK** Age **32** Birthplace **MD.**
(State)Groom's Residence **2120 OAK LODGE RD. BALTO. CO., MD.** Marital Status **DIVORCED**Bride's Name **CAROL ANN ALBANESE** Age **33** Birthplace **MD.**
(State)Bride's Residence **196 NEWBURG AV. BALTO. CO., MD** Marital Status **DIVORCED**Relationship to groom if any **NONE****KENNETH WALSH**

Name of Officiating Clergy or Authorized Officer

ASSOC. PASTOR- ROMAN CATHOLIC

Title and Religious Denomination or Office

3800 FREDERICK AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

RECEIVEDLicense Date **SEPT. 27** **85**

2

Certificate of Marriage

85-41693

State of Maryland

LICENSE NO.

129801

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name GARY L. WATSON Age 29 Birthplace VA.
(State)Groom's Residence 6306 LIBERTY RD. BALTO. CO., MD. Marital Status SINGLEBride's Name CATHERINE D. FORTUNE Age 34 Birthplace MD.
(State)Bride's Residence 12 MOUNT BATTEN CT. BALTO. CO., MD. Marital Status DIVORCEDRelationship to groom if any NONEPAUL WEINSTEIN

Name of Officiating Clergy or Authorized Officer

PASTOR- OUR SAVIOUR LUTHERAN CHURCH

Title and Religious Denomination or Office

3301 THE ALAMEDA

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

RECEIVED
OCT 2 1985
JWCIRCUIT COURT
FOR BALTIMORE CITY

2

85-41694

Certificate of Marriage

State of Maryland

LICENSE NO.

129866

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 10th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

SAMUEL M EGORIN

Age 39

Birthplace

MD.
(State)Groom's
Residence

2826 DAMASCUS CT

Marital Status

DIVORCED

Bride's
Name

DIANE L SACHS

Age 30

Birthplace

MD.
(State)Bride's
Residence

2826 DAMASCUS CT

Marital Status

SINGLE

NONE

Relationship to groom if any

RECEIVEDLicense Date OCT. 18, 85

JAMES R. BLEYBERG

Name of Officiating Clergy or Authorized Officer

RABBI

Title and Religious Denomination or Office

7401 PARK HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41695

State of Maryland

LICENSE NO.

130696

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22nd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LOUIS THEODORE WILLIAM CHRISTIAN** Age **17** Birthplace **MD.**
(State)Groom's Residence **29 DUMMURRAY WAY. BALTO.CO.,MD** Marital Status **SINGLE**Bride's Name **KATHY LEE SHAFFER** Age **17** Birthplace **MD.**
(State)Bride's Residence **29 DUMMURRAY WAY. BALTO.CO.,MD** Marital Status **SINGLE**Relationship to groom if any **NONE**SAMUEL B. HAYNIE

Name of Officiating Clergy or Authorized Officer

PASTOR- EAST BALTIIMORE CHURCH OF GOD

Title and Religious Denomination or Office

2043 EAST BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41696

LICENSE NO.
 130283

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 15th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PAUL BELL COLEGROBE**

Age **25** Birthplace **MD.**
 (State)

Groom's Residence **1835 N. FOREST CT.**

Marital Status **SINGLE**

Bride's Name **DE CHANTAL PAIGE SEIPP**

Age **23** Birthplace **MD.**
 (State)

Bride's Residence **1835 N. FOREST CT.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN F. LABOON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 28 85**

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

ST. ALPHONSUS CHURCH, 10800 OLD COURT RD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

License Fee \$ **25.00**

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41697

State of Maryland

LICENSE NO.

128738

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name TIMOTHY STUART MICKEY Age 26 Birthplace MD.
(State)

Groom's Residence 8932 SATYR HILL RD. BALTO. CO., MD. Marital Status SINGLE

Bride's Name LISA MARIE HALL Age 24 Birthplace MD.
(State)

Bride's Residence 2608 AMBLER RD. BALTO. CO., MD. Marital Status SINGLE

Relationship to groom if any NONE

BRUCE M. KELLEY

Name of Officiating Clergyman or Authorized Officer

PASTOR- ST. LUKE EV. LUTHERAN CHURCH

Title and Religious Denomination or Office

7001 HARFORD RD.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

License Fee \$25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41698

Certificate of Marriage

State of Maryland

LICENSE NO.

130440

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 17th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name VICTOR N. HUDSON, SR.Age 38 Birthplace VA.
(State)Groom's Residence 907 LEMMON ST.Marital Status DIVORCEDBride's Name SHIRLEY A. MITCHELLAge 38 Birthplace WASH. ST.
(State)Bride's Residence 314 S. BRUCE ST.Marital Status SINGLERelationship to groom if any NONERODNEY R. RUSH

Name of Officiating Clergy or Authorized Officer

License Date NOV. 7 85PASTOR- CHURCH OF GOD OF THE BIBLE

Title and Religious Denomination or Office

3300 ENGLISH CONSUL AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 22 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41699

Certificate of Marriage

State of Maryland

LICENSE NO.
130590

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 19th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JONATHAN JOEL WOODWORTH**Age **30** Birthplace **MINNESOTA**
(State)Groom's Residence **8928 SATYRHILL RD. BALTO.CO.,MD**Marital Status **SINGLE**Bride's Name **THERESA LYNN REILLY**Age **29** Birthplace **MARYLAND**
(State)Bride's Residence **813 W. JARRETTSVILLE RD. HARFORD CO.,MD** Marital Status **DIVORCED**Relationship to groom if any **NONE**ROBERT T. WOODWORTH

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 18 85**PASTOR - CHRIST & COUNTRY CHURCH

Title and Religious Denomination or Office

6020 OLD HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41700

State of Maryland

LICENSE NO.
128111

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 24th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MARK E. MARTINAge 33 Birthplace N.Y.
(State)Groom's Residence 301 WARREN AVE.Marital Status SINGLEBride's Name TOBY L. DITZAge 34 Birthplace N.Y.
(State)Bride's Residence 301 WARREN AVE.Marital Status DIVORCEDRelationship to groom if any NONEGRETCHEN VAN UTT

Name of Officiating Clergy or Authorized Officer

MINISTER- UNITED CHURCH OF CHRIST

Title and Religious Denomination or Office

License Date SEPT. 25 85

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985

License Fee \$

25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41701

State of Maryland

LICENSE NO.
129516

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ROBERT G. WOOD

Age 61 Birthplace MD.
(State)

Groom's Residence 1329 ROLAND HGTS. AVE.

Marital Status WIDOWER

Bride's Name ALICE L. MC ELVANY

Age 50 Birthplace MD.
(State)

Bride's Residence 1602 HARTSDALE RD.

Marital Status WIDOW

Relationship to groom if any NONE

RUTH A. RUSSELL

License Date SEPT. 19 85

Name of Officiating Clergyman or Authorized Officer

PASTOR- ROLAND AVE. EVERGREEN U M C

Title and Religious Denomination or Office

4228 FALLS RD.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985

License Fee - Resident \$25.00
Non-Resident \$

SAUNDRA E. BANKS, CLERK

Signature-Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41702

State of Maryland

LICENSE NO.

129986

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FREDDY L. LAWSON**

Age **36** Birthplace **GA.**
(State)

Groom's Residence **5707 ADLEIGH AV.**

Marital Status **DIVORCED**

Bride's Name **CECILIA DULAY ESTIGOY**

Age **38** Birthplace **PHILIPPINES**
(State)

Bride's Residence **1505 LONGQUARTER CT. BALTO.CO.,MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

MAURICE J. BLACKWELL

Name of Officiating Clergy or Authorized Officer

MINISTER-ST. EDWARD'S R.C. CHURCH

Title and Religious Denomination or Office

901 POPLAR GROVE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41703

State of Maryland

LICENSE NO.

130038

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARTIN G KERSSE**

Age **28** Birthplace **PA.**
(State)

Groom's Residence **5133 GREENWICH AVE**

Marital Status **SINGLE**

Bride's Name **JUDITH A GAHAGAN**

Age **23** Birthplace **MD.**
(State)

Bride's Residence **2 HARLOW CT BALTO CO MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOSEPH M. O'MEARA

Name of Officiating Clergy or Authorized Officer

PASTOR- S S PHILIP & JAMES CHURCH

Title and Religious Denomination or Office

2801 N. CHARKES ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41704

State of Maryland

LICENSE NO.

130439

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

MELVIN T DORSEY

Age 24 Birthplace MD.
(State)Groom's
Residence

4217 COON. AVE

Marital Status

SINGLEBride's
Name

DONNA L BROWN

Age 25 Birthplace MD.
(State)Bride's
Residence

3347 PAINE ST

Marital Status
NONE**SINGLE**

Relationship to groom if any

BERTRAN E. BOTTIRILL

Name of Officiating Clergy or Authorized Officer

License Date NOV. 7 85PASTOR- WOODBERRY BIBLE CHURCH

Title and Religious Denomination or Office

tt

2170 DRUID PK. DR.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41705

LICENSE NO.

130441

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOV 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

MELVIN FENNER

Age 28

Birthplace

MD.

(State)

Groom's
Residence

518 E 23RD ST

Marital Status

SINGLE

Bride's
Name

SARAH A RUSSELL

Age 25

Birthplace

VA.

(State)

Bride's
Residence

518 E 23RD ST

Marital Status

DIVORCED

NONE

Relationship to groom if any

ARTHUR R C BOONE

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 8**

85

PASTOR RESSURESTION C C CHURCH

Title and Religious Denomination or Office

3510 CLYTON AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

tt

2

85-41706

Certificate of Marriage

State of Maryland

LICENSE NO.

130618

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KEVIN F. FENWICK**Age **21** Birthplace **MD.**
(State)Groom's Residence **2521 W. COLDSRING LA.**Marital Status **SINGLE**Bride's Name **RHONDA A. YOUNG**Age **30** Birthplace **MD.**
(State)Bride's Residence **619 EDGEWOOD ST.**Marital Status **SINGLE**Relationship to groom if any **NONE****ISIAH B? CLARK**

Name of Officiating Clergy or Authorized Officer

ASS'T. PASTOR- ANTIOCH BAPT. CHURCH

Title and Religious Denomination or Office

5632

Address of Clergy or Authorized Officer

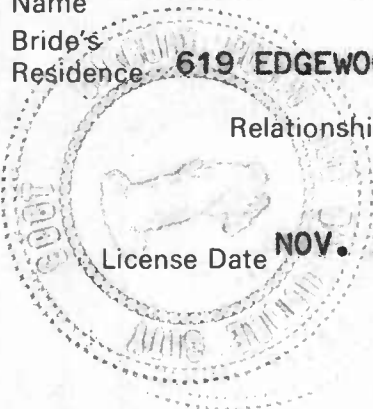
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41707

State of Maryland

LICENSE NO.

129635

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

STEPHEN B SCHULER

Age 25

Birthplace

MD.
(State)

Groom's Residence

906 HARDEN CT

Marital Status

SINGLE

Bride's Name

MEGAN A SETH

Age 23

Birthplace

CONN
(State)

Bride's Residence

15734 FALLS RD BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

PAUL G. COOK

Name of Officiating Clergy or Authorized Officer

PRIEST-ROMAN CATHOLIC

Title and Religious Denomination or Office

101 CHURCHLANE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

RECEIVED
License Date OCT. 23 85

NOV 26 1985

CIRCUIT COURT
FOR BALTIMORE CITYLicense Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41708

State of Maryland

LICENSE NO.

129204

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT J LANDON**
 Groom's Residence **408 N ROBINSON ST**

Age **30** Birthplace **MD.**
 (State)
 Marital Status **SINGLE**

Bride's Name **MARY A RONDO**
 Bride's Residence **3400 MAYFIELD AVE**

Age **27** Birthplace **MD.**
 (State)
 Marital Status **SINGLE**

Relationship to groom if any

NONE

JOHN DIEZENBACH

Name of Officiating Clergyman or Authorized Officer

PRIEST-ROMAN CATHOLIC

Title and Religious Denomination or Office

2638 E. BALTIMORE ST.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee

\$25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41709

Certificate of Marriage

State of Maryland

LICENSE NO.

130293

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**LAWRENCE WAYNE ENGLE**Age **32** Birthplace **MD.**
(State)Groom's
Residence**8310 HARPS CT. A.A. CO., MD.**Marital Status **DIVORCED**Bride's
Name**BRENDA GAIL FOSTER**Age **30** Birthplace **MD.**
(State)Bride's
Residence**8310 HARPS CT. A.A. CO., MD.**Marital Status **DIVORCED**

Relationship to groom if any

NONE

License Date

NOV 1**85****JW**Edwin Schell

Name of Officiating Clergy or Authorized Officer

Minister

Title and Religious Denomination or Office

112 W. Conway ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11.25.85License Fee \$ 26.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41710

LICENSE NO.
129992

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 20th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **DAVID H. SHIREY**

Age **20** Birthplace **PA.**
(State)

Groom's
Residence **2967 KESWICK RD.**

Marital Status **SINGLE**

Bride's
Name **JANICE FULTON**

Age **23** Birthplace **MD.**
(State)

Bride's
Residence **1017 WEST 37TH. ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

DAVID W. RIMBACH

Name of Officiating Clergy or Authorized Officer

MINISTER- UNITED METH. CHURCH

Title and Religious Denomination or Office

3449 FALLS RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41711

Certificate of Marriage

State of Maryland

LICENSE NO.
130126

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **JAMES L. ZUREABLE**

Age **44** Birthplace **MD.**
(State)

Groom's
Residence **2504 MARYLAND AVENUE**

Marital Status **DIVORCED**

Bride's
Name **MARY R. KUGEL**

Age **45** Birthplace **MD.**
(State)

Bride's
Residence **2504 MARYLAND AVENUE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

ROBERT HENRY BROOKMAN

Name of Officiating Clergy or Authorized Officer

ELDER- UNITED METH.

Title and Religious Denomination or Office

3403 GOUGH ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **OCT. 21, 85**

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41712

LICENSE NO.

130257

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DESSIE LEE BURNETTE**

Age **32** Birthplace **GA.**
(State)

Groom's Residence **936 TRURO LANE**

Marital Status **SINGLE**

Bride's Name **ROMONA R. WILLIAMS**

Age **31** Birthplace **GA.**
(State)

Bride's Residence **3012 FAIRVIEW RD. BALTO. CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

EUGENE MITCHELL

Name of Officiating Clergy or Authorized Officer

MINISTER-

License Date **OCT. 28 85**

Title and Religious Denomination or Office

147 JONES ST. CARTERSVILLE, GA.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

NOV 26 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

tt

2

85-41713

Certificate of Marriage

State of Maryland

LICENSE NO.

130305

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT DONALD STRAW, JR.** Age **28** Birthplace **MD.**
(State)Groom's Residence **1813 PIONEER CT. A.A. CO., MD.** Marital Status **SINGLE**Bride's Name **BONNIE ANN JONES** Age **24** Birthplace **MD.**
(State)Bride's Residence **1813 PIONEER CT. A.A. CO., MD.** Marital Status **SINGLE**Relationship to groom if any **NONE****MARK R. BOLING**License Date **NOV. 20/ 85**Name of Officiating Clergy or Authorized Officer
PASTOR- BROOKLYN UNITED METH. CHURCHTitle and Religious Denomination or Office
401 PONTIAC AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
office on **NOV 26 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41714

LICENSE NO.

130337

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

GARRY ROBERT BOLAN

Age

32

Birthplace

MD.

(State)

Groom's
Residence

8008 YELLOWSTONE RD. BALTO. CO., MD.

Marital Status

SINGLE

Bride's
Name

CHARLOTTE MABEL STUBBS

Age

29

Birthplace

MD.

(State)

Bride's
Residence

6222 THE ALAMEDA

Marital Status

SINGLE

Relationship to groom if any

NONE

JOHN R. SABATELLI

Name of Officiating Clergy or Authorized Officer

PASTOR- LUTHERAN CHURCH IN AMERICA

Title and Religious Denomination or Office

CHARLES & HILL STS.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41715

Certificate of Marriage

State of Maryland

LICENSE NO.

130338

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---|----------------|-----------------|------------|------------|
| Groom's Name | MARK ANDREW WARNER | Age | 33 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 317 STEMMERS RD. BALTO. CO., MD. | Marital Status | DIVORCED | | |
| Bride's Name | MARY MARGARET BENZING | Age | 27 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 317 STEMMERS RD. BALTO. CO., MD. | Marital Status | SINGLE | | |

Relationship to groom if any **NONE****ANTHONY WARNER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 6 85****PRIEST- CATHOLIC PARISH**

Title and Religious Denomination or Office

6420 E. PRATT ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41716

Certificate of Marriage

State of Maryland

LICENSE NO.

130348

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOSEPH G MASSONI

Age 26 Birthplace MD.
(State)Groom's
Residence

4612 ELSRODE AVE

Marital Status SINGLEBride's
Name

SHERRY L HARMONY

Age 22 Birthplace MD.
(State)Bride's
Residence

3039 ARIZONA AVE BALTO CO MD

Marital Status SINGLERelationship to groom if any NONE

WILLIAM F. BURKE

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. FRANCIS OF ASSISI R C CHURCH

Title and Religious Denomination or Office

3615 SHARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41717

State of Maryland

LICENSE NO.

130377

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FRANK A. FAZIO**

Age **30** Birthplace **MD.**
(State)

Groom's Residence **8764 CLOUDLEAP CT. HOWARD CO., MD.** Marital Status **SINGLE**

Bride's Name **ROSE M. SAINTSING**

Age **23** Birthplace **MD.**
(State)

Bride's Residence **8764 CLOUDLEAP CT. HOWARD CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN O'TOOLE

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

6420 E. PRATT ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **NOV. 7 85**

tt

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41718

LICENSE NO.

130411

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID PAUL GERMAN**

Age **24** Birthplace **MD.**
(State)

Groom's Residence **3909 BREHMS LANE**

Marital Status **SINGLE**

Bride's Name **DOREEN THERESA MEYERS**

Age **23** Birthplace **MD.**
(State)

Bride's Residence **2807 OVERLAND AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

MARTIN H. DEMEK

Name of Officiating Clergy or Authorized Officer

85

ASSOC. PASTOR-LITTLE FLOWER R.C. CHURCH

Title and Religious Denomination or Office

2854 BRENDAN AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

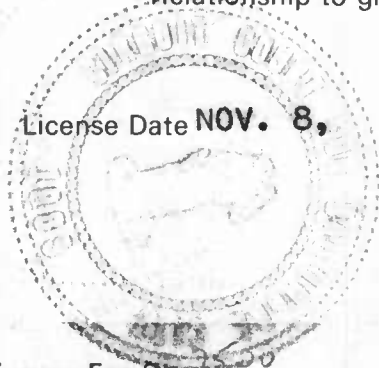
office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41719

LICENSE NO.

130462

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

PARIS JERROD SINGLETARY

Age 28

Birthplace

TEXAS

(State)

Groom's
Residence

3402 JO ANNE DR. BALTO. CO., MD

Marital Status

SINGLE

Bride's
Name

MICHELLE ANNE DOUGLAS

Age 25

Birthplace

NEW YORK

(State)

Bride's
Residence

3402 JO ANNE DR. BALTO. CO., MD

Marital Status

SINGLE

Relationship to groom if any

NONE

J. LUTHER CARROLL

Name of Officiating Clergy or Authorized Officer

PASTOR-CHRISTIAN LIFE CHURCH

Title and Religious Denomination or Office

6605 LIBERTY RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 21** **85**

TT

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41720

Certificate of Marriage

State of Maryland

LICENSE NO.

130468

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name JEFFERY A. MARINAge 30 Birthplace MD.
(State)

Groom's

Residence 122 RIVERSIDE RD. BALTO. CO., MD.Marital Status SINGLE

Bride's

Name LYNN M. DRYMALAAge 27 Birthplace MD.
(State)

Bride's

Residence 7911 GRAYHAVEN RD. BALTO, CO., MD.Marital Status SINGGERelationship to groom if any NONEJOHN DIETZENBACH

Name of Officiating Clergy or Authorized Officer

License Date NOV 1285 PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

JW

2638 E. BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00NOV 26 1985
SAUNDRA E. BANKS, CLERK
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41721

LICENSE NO.

130512

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DANIEL ADAM FULLER Age 24 Birthplace FLA.
(State)

Groom's Residence 8831 PENNSBURY PL. BALTO. CO., MD. Marital Status SINGLE

Bride's Name SHARON ANN BENTLEY Age 25 Birthplace MD.
(State)

Bride's Residence 8831 PENNSBURY PL. BALTO. CO., MD. Marital Status DIVORCED

Relationship to groom if any NONE

CALVIN L. HUDSON

Name of Officiating Clergy or Authorized Officer

PASTOR- SECOND & FOURTH BAPT. CHURCH

Title and Religious Denomination or Office

414 N. LUZERNE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

NOV 15 85

JW

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41722

State of Maryland

LICENSE NO.

130526

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BRUCE D. MYER**

Age **23** Birthplace **MD.**
(State)

Groom's Residence **2760 PELHAM AVENUE**

Marital Status **SINGLE**

Bride's Name **SHERRIE L. SULLENS**

Age **21** Birthplace **MD.**
(State)

Bride's Residence **2885 PELHAM AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

GEORGE A. RESTREPO

Name of Officiating Clergy or Authorized Officer

ASSOC. PASTOR- ROMAN CATHOLIC

Title and Religious Denomination or Office

2854 BRENDAN AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 14, 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41723

Certificate of Marriage

State of Maryland

LICENSE NO.

130546

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|------------------------------------|----------------|----------------|------------|----------------|
| Groom's Name | FREDERICK W. HASTY | Age | 47 | Birthplace | VA. |
| | | | | (State) | |
| Groom's Residence | 2708 EDMONDSON AVE. | Marital Status | WIDOWER | | |
| Bride's Name | BESSYE M. BEST | Age | 48 | Birthplace | N. CAR. |
| | | | | (State) | |
| Bride's Residence | 501 E. PRESTON ST. APT. 119 | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

TOMMIE L. JENKINS

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 15 85****MINISTER**

Title and Religious Denomination or Office

tt

1821 N. AISQUITH ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41724

Certificate of Marriage

State of Maryland

LICENSE NO.

130548

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **JOHN R. KRAFT, JR**

Age **40** Birthplace **MD.**
(State)

Groom's
Residence **793 POWHATAN BEACH RD. A.A.CO., MD** Marital Status **DIVORCED**

Bride's
Name **ANNA ROMBERGER** Age **30** Birthplace **MD.**
(State)

Bride's
Residence **793 POWHATAN BEACH RD. A.A.CO., MD** Marital Status **DIVORCED**

Relationship to groom if any **NONE**

CONSTANTINE M. MONIOS

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 15, 85**

DEAN- GREEK ORTHODOX CATHEDRAL

Title and Religious Denomination or Office

24 W. PRESTON ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41725

Certificate of Marriage

State of Maryland

LICENSE NO.

130560

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KERMIT MARK EARLES**Age **29** Birthplace **MD.**
(State)Groom's Residence **3319 ACTON RD. BALTO.CO., MD**Marital Status **SINGLE**Bride's Name **KAREN MARIE ALLEN**Age **32** Birthplace **HAWAII**
(State)Bride's Residence **322 WILSON BLVD. A.A.CO., MD**Marital Status **DIVORCED**Relationship to groom if any **NONE****GREALD EARLES**

Name of Officiating Clergy or Authorized Officer

CHAPLAIN-U S A CHURCH OF THE NAZARENE

Title and Religious Denomination or Office

201 C PENCE ST. FORT HAMILTON, BROOKLYN,

Address of Clergy or Authorized Officer

N.Y.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41726

Certificate of Marriage

State of Maryland

LICENSE NO.

130562

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **FRANK JOSEPH WILSON**Age **26** Birthplace **MD.**
(State)Groom's
Residence **13-B TENTMILL LN. BALTO.CO., MD**Marital Status **SINGLE**Bride's
Name **REGINA MARIE PULIGNANI**Age Birthplace **MD.**
(State)Bride's
Residence **2226 PELHAM AV.**Marital Status **SINGLE**Relationship to groom if any **NONE****WILLIAM F. BURKE**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 15 85****PASTOR- ST. FRANCIS & ASSISI R C CHURCH**

Title and Religious Denomination or Office

JW**3615 HARFORD RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41727

State of Maryland

LICENSE NO.

130573

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ADNAN NAEEMA BASIT**

Age **25** Birthplace **DOHA(QATAR)**
(State)

Groom's Residence **1403 MCHENRY ST.**

Marital Status **SINGLE**

Bride's Name **KIMBERLY ANN ZILER**

Age **25** Birthplace **MD.**
(State)

Bride's Residence **1403 MCHENRY ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

W. JACK BUSSARD

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 18 85**

PASTOR-

Title and Religious Denomination or Office

TT

525 SCOTT ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41728

Certificate of Marriage

State of Maryland

LICENSE NO.

130580

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---------------------------------|----------------|---------------|------------|------------|
| Groom's Name | SAMUEL L. GRAFFIOUS, JR. | Age | 33 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 1612 CYPRESS ST. | Marital Status | SINGLE | | |
| Bride's Name | DONNA J. ALLEN | Age | 30 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 1612 CYPRESS ST. | Marital Status | SINGLE | | |

Relationship to groom if any **NONE****MICHAEL G. FAHEY**

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 18 85** **PASTOR- FIRST BAPT. CHURCH OF BROOKLYN**

Title and Religious Denomination or Office

3801 5th ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
office on **NOV 26 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41729

LICENSE NO.

130599

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 24th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **RODNEY ANDREW JOHNSON**Age **36**

Birthplace

MD.

(State)

Groom's

Residence **4526 PIMLICO RD.**

Marital Status

DIVORCED

Bride's

Name **THERESA EMMA JONES**Age **35**

Birthplace

MD.

(State)

Bride's

Residence **4526 PIMLICO RD.**

Marital Status

SINGLE

Relationship to groom if any

NONE**P. H. FRANKLIN**

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. MARTIN SPIRITUAL CHURCH OF2118 **MADISON AVE.**

Title and Religious Denomination or Office

CHRIST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

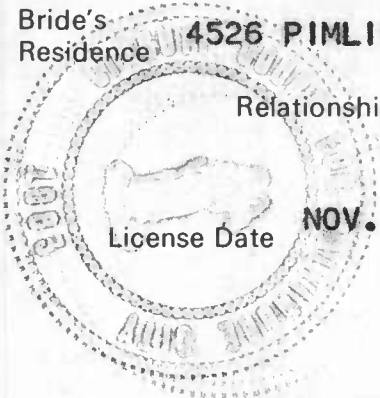
office on

NOV 26 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41730

State of Maryland

LICENSE NO.

130614

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROY F. TILLER**
 Groom's Residence **1411 AISQUITH STREET**
 Bride's Name **SHIRLEY M. WILLIAMS**
 Bride's Residence **1411 AISQUITH STREET**

Age **5/5** Birthplace **GEORGIA**
 (State)
 Marital Status **DIVORCED**
 Age **43** Birthplace **MARYLAND**
 (State)
 Marital Status **WIDOW**

Relationship to groom if any **NONE**

License Date **NOV 18 85**
JW

LEWIS I. KEENE

Name of Officiating Clergy or Authorized Officer

PASTOR- UNITED METH. CHURCH

Title and Religious Denomination or Office

1500 N. MILTON AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35 00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41731

LICENSE NO.

130617

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---|----------------|---------------|------------|------------|
| Groom's Name | JAMES A. CALLAHAN, 2ND. | Age | 32 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 6823 BONNIE RIDGE DR. BALTO.CO., MD. | Marital Status | SINGLE | | |
| Bride's Name | KERRI M. BURGESS | Age | 26 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 6823 BONNIE RIDGE DR. BALTO.CO., MD. | Marital Status | SINGLE | | |

Relationship to groom if any **NONE**

JOHN R SABATELLI

Name of Officiating Clergy or Authorized Officer

PASTOR- LUTHERAN CHURCH IN AMERICA

Title and Religious Denomination or Office

CHARLES & HILL STS.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV 22 85**

JW

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41732

LICENSE NO.
130638

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KENNETH BRYAN TAWNEY**

Age **24** Birthplace **MD.**
(State)

Groom's Residence **3905 GREENMOUNT AVENUE**

Marital Status **SINGLE**

Bride's Name **ALLISON MARIE WELK**

Age **20** Birthplace **MD.**
(State)

Bride's Residence **3905 GREENMOUNT AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JUDITH E. MICHAELS

Name of Officiating Clergy or Authorized Officer

License Date **NOV 21**

85

PASTOR- PRESBYTERIAN CHURCH U S A

Title and Religious Denomination or Office

921 E. BELVEDERE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41733

LICENSE NO.

130645

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

11:26

Groom's
Name

RICHARD PATRICK FREELAND

Age 20 Birthplace MD.
(State)

Groom's
Residence

1754 JUDY WAY HARFORD CO., MD.

Marital Status SINGLE

Bride's
Name

LAUREL LEA SCHUMAN

Age 18 Birthplace MD.
(State)

Bride's
Residence

1754 JUDY WAY HARFORD CO., MD.

Marital Status SINGLE

Relationship to groom if any NONE

JOHN T. WIELEBSKI

Name of Officiating Clergy or Authorized Officer

License Date NOV. 21 85

PRIEST- RMAN CATHOLIC

Title and Religious Denomination or Office

5310 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41734

LICENSE NO.
 130651

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
 Name **FRED BERRY**

Age **46** Birthplace **PA.**
(State)

Groom's
 Residence **710 PENNSYLVANIA AV.**

Marital Status **SINGLE**

Bride's
 Name **PERLINDA JEAN FREEMAN**

Age **27** Birthplace **N.C.**
(State)

Bride's
 Residence **710 PENNSYLVANIA AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

GROVER L. MC CREA, JR.

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 21** **85**

PASTOR - HOLY TRINITY

Title and Religious Denomination or Office

2601 PENNSYLVANIA AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41735

State of Maryland

LICENSE NO.

130674

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name JOHN B TUNNEY

Age 25 Birthplace MD.
(State)

Groom's
Residence 1111 W. 42nd ST

Marital Status DIVORCED

Bride's
Name CAROLYN D. MITZEL

Age 23 Birthplace MD.
(State)

Bride's
Residence 1111 W. 42nd ST

Marital Status DIVORCED

Relationship to groom if any NONE

WILLIAM E. UTTERBACK

Name of Officiating Clergy or Authorized Officer

PASTOR- SEXTON UNITED METH. CHURCH

Title and Religious Denomination or Office

2405 JAMES PL.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date

NOV 22 85

JW

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41736

Certificate of Marriage

State of Maryland

LICENSE NO.

130331

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9 day of Nov. 1985
 the following persons were by me united in marriage at Baltimore, md.
 (City or Town)
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ALBERT BENJAMIN CRAWLEY, 3RD**Age **23** Birthplace **MD.**
(State)Groom's Residence **714 N CARROLLTON AV.**Marital Status **SINGLE**Bride's Name **THERESE CHRISTINE SISCO**Age **21** Birthplace **TEXAS**
(State)Bride's Residence **714 N. CARROLLTON AV.**Marital Status **SINGLE**

Relationship to groom if any

NONELicense Date **OCT. 31 85**

O. St. Clair Franklin
 Name of Officiating Clergy or Authorized Officer

Pastor
 Title and Religious Denomination or Office
3400 Hilton St.
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

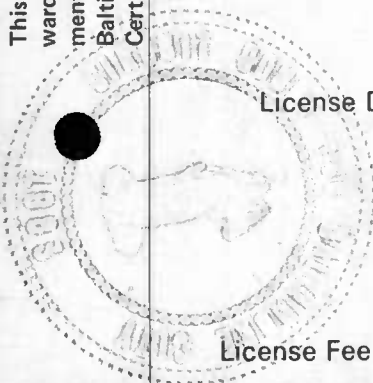
I hereby certify that the above is a true copy of a record filed in this
 office on NOV 15 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage
State of Maryland

85-41737

LICENSE NO.
 130053

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 9 day of Nov. 1985
 the following persons were by me united in marriage at Baltimore, Md.
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM DAVID RITCHIE**

Age **45** Birthplace **OHIO.**
 (State)

Groom's Residence **23 OAK SHADOWS CT. BALTO.CO., MD**

Marital Status **DIVORCED**

Bride's Name **MARGERY JOHANNA MAC LURE**

Age **36** Birthplace **PA.**
 (State)

Bride's Residence **2 SHAWNEE CT. BALTO.CO., MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 18 85**

Hubert Temme
 Name of Officiating Clergy or Authorized Officer

Pastor
 Title and Religious Denomination or Office

Loch Raven + Belvedere
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
 office on NOV 15 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41738

Certificate of Marriage

State of Maryland

LICENSE NO.

130503

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 12th day of NOVEMBER 19 85BALTIMORE, MD.the following persons were by me united in marriage at _____
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MILTON WASHINGTON, JR.**Age **29** Birthplace **MD.**
(State)Groom's Residence **2569 KIRK AVENUE**Marital Status **SINGLE**Bride's Name **LESLIE C. CHRISTOPHER**Age **28** Birthplace **OK,**
(State)Bride's Residence **2569 KIRK AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****ASDEAN D. JOHNSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 12****85****REV. DR. ASDEAN D. JOHNSON**

Title and Religious Denomination or Office

1233 N. BOND ST. BALTO, MD. 21213

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41739

State of Maryland

LICENSE NO.

130432

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8th day of Nov. 1985

the following persons were by me united in marriage at

Balt. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **MARTIN GOREN**Age **40** Birthplace **MD.**
(State)Groom's
Residence **110 W. 39th STREET**Marital Status **DIVORCED**Bride's
Name **KAY BERNEY**Age **34** Birthplace **MD.**
(State)Bride's
Residence **110 W. 39th STREET**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 7 85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-16-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41740

State of Maryland

LICENSE NO.

130499

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL PAUL BALLARD, SR**Age **23** Birthplace **MD.**
(State)Groom's Residence **5317 WESLEY AV.**Marital Status **SINGLE**Bride's Name **LINDA MAUDE COOK**Age **28** Birthplace **MD.**
(State)Bride's Residence **3310 SUMTER AV.**Marital Status **SINGLE**

Relationship to groom if any

NONE**MOLESTER J. HUNTER**

Name of Officiating Clergy or Authorized Officer

License Date

BAPTIST

Title and Religious Denomination or Office

200 HIGH FALCON RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 18 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41741

LICENSE NO.

130472

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JEFFREY A. KRAFT**
Groom's Residence **3020 CHRISTOPHER AV.**
Bride's Name **BARBARA L. MEYERS**
Bride's Residence **3020 CHRISTOPHER AV.**

Age **20** Birthplace **MD.**
(State)
Marital Status **SINGLE**
Age **19** Birthplace **MD.**
(State)
Marital Status **SINGLE**

Relationship to groom if any **NONE**

ANTHONY S. MARANTO

Name of Officiating Clergy or Authorized Officer

DEACON- ROMAN CATHOLIC

Title and Religious Denomination or Office

ST. DOMINIC CHURCH 5310 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 18 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 14 85**

tt

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41742

LICENSE NO.

130459

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
 Name **ERNEST HENDERSON**

Age **41** Birthplace **MD.**
 (State)

Groom's
 Residence **2735 CARVER RD.**

Marital Status **SINGLE**

Bride's
 Name **DEBORAH KAREN DYSON**

Age **33** Birthplace **MD.**
 (State)

Bride's
 Residence **2735 CARVER RD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOHN C. MABE

Name of Officiating Clergy or Authorized Officer

PASTOR- PENTECOSTAL CHURCH

Title and Religious Denomination or Office

2734 BOOKERT DR.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 18 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 13,**

85

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41743

State of Maryland

LICENSE NO.

130445

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ALGON C. LANDRUM, JR Age 33 Birthplace N.C.
(State)
Groom's Residence 3212 SOUTHGREEN RD. BALTO.CO., MD Marital Status DIVORCED
Bride's Name JOAN L. FRANKLIN Age 30 Birthplace MD.
(State)
Bride's Residence 3212 SOUTHGREEN RD. BALTO.CO., MD Marital Status DIVORCED
Relationship to groom if any NONE

License Date NOV. 8, 85

CHARLES E. FLETCHER

Name of Officiating Clergy or Authorized Officer

PASTOR- PENTECOSTAL BAPT. CHURCH

Title and Religious Denomination or Office

1615 POPLAR GROVE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 18 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41744

LICENSE NO.

130374

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ARTHUR MASON, JR.

Age 23 Birthplace MD.
(State)

Groom's Residence 910 N. CALHOUN STREET

Marital Status SINGLE

Bride's Name KAREN DIANE FIELDS

Age 22 Birthplace MD.
(State)

Bride's Residence 507 POPLAR GROVE STREET

Marital Status SINGLE

Relationship to groom if any NONE

JAMES H. BULL

Name of Officiating Clergy or Authorized Officer

License Date NOV. 4

85

BAPTIST

Title and Religious Denomination or Office

1501 N. BETHEL ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 18 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature of Clerk of the Court

tt

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41745

LICENSE NO.

130364

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name GREGORY ANDRE BROWN

Age 39 Birthplace MD.
(State)

Groom's Residence 1611 DURHAM ST.

Marital Status DIVORCED

Bride's Name MICHELE ELIZABETH BROWN

Age 40 Birthplace MD.
(State)

Bride's Residence 6840 STURBRIDGE DR.

Marital Status DIVORCED

Relationship to groom if any NONE

JOHNNY R. CALHOUN

Name of Officiating Clergy or Authorized Officer

License Date NOV. 4,

85 ASS'T. PASTOR - A.M.E. CHURCH

Title and Religious Denomination or Office

1419 MC CULLOH ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

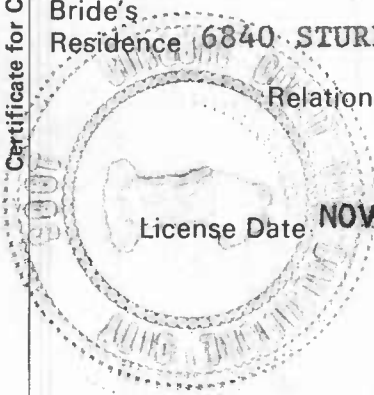
office of

NOV 18 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage
State of Maryland

85-41746

LICENSE NO.
 130346

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ORANGE L WILLIAMS**

Age **43** Birthplace **VA**
 (State)
WIDOWER

Groom's Residence **1010 REVERDY RD**

Marital Status

Bride's Name **DELORES WEBB**

Age **37** Birthplace **N Y**
 (State)
SINGLE

Bride's Residence **1010 REVERDY RD**

Marital Status

NONE

Relationship to groom if any

HOWARD R. QUEEN

Name of Officiating Clergy or Authorized Officer

License Date **NOV: 4**

85 PASTOR- PLEASANT HOPE BAPTIST CHURCH

Title and Religious Denomination or Office

3719 NORTONIO RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOV 18 1985**

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

tt

2

Certificate of Marriage

State of Maryland

85-41747

LICENSE NO.

130325

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 10th day of Nov. 1985

the following persons were by me united in marriage at

Balto. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

MICHAEL J MOX

Age 28 Birthplace

MD
(State)

Groom's
Residence

5538 SELMA AVE BALTO CO MD

Marital Status

DIVORCED

Bride's
Name

LYN A MILROD

Age 23 Birthplace

MD
(State)

Bride's
Residence

5538 SELMA AVE BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date NOV. 6 85

Daniel Broadwater
Name of Officiating Clergy or Authorized Officer

Minister
Title and Religious Denomination or Office

29 Holmehurst Ave.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-18-85
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41748

State of Maryland

LICENSE NO.

130286

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 10th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

GEORGE E. PAPADEMETRIOU

Age 22

Birthplace

MD.
(State)

Groom's

Residence 2317 EASTERN AV.

Marital Status SINGLE

Bride's

Name SMARAGDI HATZIDIAKOS

Age 23

Birthplace

CANADA
(State)

Bride's

Residence 624 TOLNA ST.

Marital Status SINGLE

Relationship to groom if any

NONE

License Date OCT. 29

85

Name of Officiating Clergy or Authorized Officer

George Kalpapis

Title and Religious Denomination or Office

Minister

Address of Clergy or Authorized Officer

520 S. Ponca ST

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-18-85SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be filed by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41749

LICENSE NO.

130252

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of Nov. 19 85

the following persons were by me united in marriage at

Balto. Md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

FRANK F BROWNE

Age 24

Birthplace

WEST INDIES
(State)Groom's
Residence

4061 ANNELLEN RD

Marital Status

SINGLE

Bride's
Name

JUDY C. SOBERS

Age 24

Birthplace

WEST INDIES
(State)Bride's
Residence

4061 ANNELLEN RD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT. 28

85

tt

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.0011-18-85
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41750

State of Maryland

LICENSE NO.

130158

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 15 day of Nov 19 85

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARK KENNETH BAYNE**
 Groom's Residence **5909 EURITH AVENUE**
 Bride's Name **LINDA ANN STRECKFUS**
 Bride's Residence **5909 EURITH AVENUE**

Age **31** Birthplace **MD.**
 (State)
 Marital Status **DIVORCED**
 Age **26** Birthplace **MD.**
 (State)
 Marital Status **SINGLE**

Relationship to groom if any

NONELicense Date **OCT. 22 85**

tt

Charlie J. Janner
Name of Officiating Clergy or Authorized OfficerMinister
Title and Religious Denomination or OfficeBalti. Md.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-18-85License Fee \$ 35.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41751

State of Maryland

LICENSE NO.

130156

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 14th day of Nov. 19 85

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT LEO BROWN, JR.**Age **19** Birthplace **MD.**
(State)Groom's Residence **5507 GROVELAND AVENUE**Marital Status **SINGLE**Bride's Name **LAFAYE BERNITA HAWKS**Age **19** Birthplace **PA.**
(State)Bride's Residence **5623 MC CLEAN BLVD.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **OCT. 21 85**James Watson
Name of Officiating Clergy or Authorized OfficerMinister
Title and Religious Denomination or Office4110 Garrison Blvd.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-18-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41752

LICENSE NO.
 129931

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of Nov- 1985

the following persons were by me united in marriage at

Balti. Md.
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOSEPH A STUMBROSKI**

Age **25**

Birthplace **MD.**
 (State)

Groom's Residence **5340 KING ARTHUR CIRCLE BALTO CO MD**

Marital Status

SINGLE

Bride's Name **ANDREA R POGGIOLI**

Age **22**

Birthplace **MD.**
 (State)

Bride's Residence **3501 SHANNON DR**

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date **OCT. 14**

85

Vincent Blue
 Name of Officiating Clergy or Authorized Officer

Catholic Priest
 Title and Religious Denomination or Office

4220 Erdman Ave.
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11/8-85

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41753

State of Maryland

LICENSE NO.

129640

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 15th day of Nov. 19 85

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**LOUIS TIRABASSI**Age **25** Birthplace **MD.**
(State)Groom's
Residence**3718 E. PRATT STREET**Marital Status **SINGLE**Bride's
Name**PAULETTE JACQUELINE KWOKA**Age **21** Birthplace **MD.**
(State)Bride's
Residence**3529 DUDLEY AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**Luigi Esposito

Name of Officiating Clergy or Authorized Officer

Catholic Priest

Title and Religious Denomination or Office

3600 Claremont Ave.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-18-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41754

State of Maryland

LICENSE NO.
129356

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **MORTON J. TASKE**Age **57** Birthplace **WASH. D.C.**
(State)Groom's
Residence **3630 FORD LA.**Marital Status **DIVORCED**Bride's
Name **JANE S. ERDMAN**Age **49** Birthplace **MARYLAND**
(State)Bride's
Residence **3630 FORD LA**Marital Status **DIVORCED**

Relationship to groom if any

NONELicense Date **SEPT. 26,** **85***Avyeh Azriel*
Name of Officiating Clergyman or Authorized Officer*Rabbi*
Title and Religious Denomination or Office*7401 Park Hgts. Ave.*
Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

*11-18-85*License Fee *\$25.00**SAUNDRA E. BANKS, CLERK*

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41755

LICENSE NO.

129901

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9 day of Nov. 1985

the following persons were by me united in marriage at Balto. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ALLEN SYLVESTER SCOTT**

Age **28** Birthplace **N.C.**
(State)

Groom's Residence **746 E. 36TH ST**

Marital Status **SINGLE**

Bride's Name **MAGDALENE CHANDLER**

Age **29** Birthplace **MD.**
(State)

Bride's Residence **746 E. 36TH ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **OCT. 7**

85

tt

Johnny C. Carrington, Jr.
 Name of Officiating Clergy or Authorized Officer

Pastor
 Title and Religious Denomination or Office

3777 Bruce Run Road
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

21133

I hereby certify that the above is a true copy of a record filed in this
 office on 11-15-85

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41756

LICENSE NO.

130515

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 16 day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
 Name

KEITH SCRUGGS

Age 22 Birthplace

MD.
 (State)

Groom's

Residence **1622 EAST 28TH. ST.**

Marital Status **SINGLE**

Bride's

Name **JONZETTA DELORES JORDAN**

Age 21 Birthplace

MD.
 (State)

Bride's

Residence **1622 EAST 28TH. ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **NOV 15 85**

JW

Clarence F. Poole
 Name of Officiating Clergy or Authorized Officer

Baptist Minister
 Title and Religious Denomination or Office

56 N. Murley ST
 Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

1/19/85
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41757

Certificate of Marriage

State of Maryland

LICENSE NO.

130496

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 18th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name WARREN C. FOSTERAge 24 Birthplace MD.
(State)Groom's Residence 538 LINWOOD AVE.Marital Status SINGLEBride's Name ARETHA C. PAULAge 22 Birthplace MD.
(State)Bride's Residence 4902 GUNTHER AVE. APT.F.Marital Status SINGLERelationship to groom if any NONELicense Date NOV 15 85

JW

Lee Evans

Name of Officiating Clergy or Authorized Officer

Minister

Title and Religious Denomination or Office

2433 E. Madison ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-19-85License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and for-
warded to the Division of Vital Records, State Depart-
ment of Health and Mental Hygiene, 201 W. Preston Street,
Baltimore, MD 21201, upon receipt of page 3, copy of
Certificate for Clerk of Court.

2

85-41758

Certificate of Marriage

State of Maryland

LICENSE NO.

130487

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 15th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **RONALD LEE COLLINS**Age **20** Birthplace **MD.**
(State)Groom's
Residence **4000 COLLEGE AVE. HOWARD CO., MD.**Marital Status **SINGLE**Bride's
Name **TERESA GRACE FOLHART**Age **25** Birthplace **MD.**
(State)Bride's
Residence **109 E. FORT AVE.**Marital Status **SINGLE**

Relationship to groom if any

NONE

License Date

NOV 12 85**JW**

Name of Officiating Clergy or Authorized Officer

Donald Berge

Title and Religious Denomination or Office

Lutheran Minister

Address of Clergy or Authorized Officer

1314 E. 36th St

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-19-85
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature of Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41759

Certificate of Marriage

State of Maryland

LICENSE NO.

130479

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOHN RICHARD DOCKMAN

Age 25 Birthplace

MD.
(State)

Groom's

Residence 7021 B LACHLAN CIR. BALTO., CO., MD.

Marital Status

SINGLE

Bride's

Name

MICHELE TERESE BIGGS

Age 24 Birthplace

MD.
(State)

Bride's

Residence 7021 B LACHLAN CIR. BALTO. CO., MD.

Marital Status

DIVORCED

Relationship to groom if any NONE

License Date NOV. 13

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

5.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41760

Certificate of Marriage

State of Maryland

LICENSE NO.

130442

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16 day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

WAYNE R. LEWIS

Age 41Birthplace MD.
(State)Groom's
Residence

6 MT BATTEN CT BALTO CO MD

Marital Status

SINGLEBride's
Name

MARGARET A SMITH

Age 40Birthplace MD.
(State)Bride's
Residence

6904 BRIGHTWAY PL

Marital Status

SINGLE

Relationship to groom if any

NONEKenneth Galla Jr.
Name of Officiating Clergy or Authorized OfficerLicense Date NOV. 7 85Minister
Title and Religious Denomination or Office

TT

Balti. Md.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-19-85
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41761

Certificate of Marriage

State of Maryland

LICENSE NO.

130444

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of Nov. 1985

the following persons were by me united in marriage at

Balt. Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

MICHAEL S KNOX

Age

33

Birthplace

MD.

(State)

Groom's
Residence

6 G BREEZE BRANCH CT BALTO CO MD

Marital Status

SINGLE

Bride's
Name

BRENDA S BONUCCELLI

Age

28

Birthplace

VA

(State)

Bride's
Residence

4 WALDEN MILL WAY BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

NOV. 12

85

Name of Officiating Clergy or Authorized Officer

F. Stephen Macher

Title and Religious Denomination or Office

Catholic Priest

Address of Clergy or Authorized Officer

Balt. Md.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-19-85

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41762

State of Maryland

LICENSE NO.

130434

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 17th day of Nov. 1985

the following persons were by me united in marriage at

Balt. Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JESSE

H.

JOHNSON

Age

51

Birthplace

S. CAR.

(State)

Groom's
Residence

2200 ROUND

RD.

APT. B1

Marital Status

SINGLE

Bride's
Name

ANNETTE

E.

WATERS

Age

40

Birthplace

MD.

(State)

Bride's
Residence

2200 ROUND

RD.

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date

NOV. 7,

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-19-85

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41763

Certificate of Marriage

State of Maryland

LICENSE NO.

130469

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of Nov. 19 85

the following persons were by me united in marriage at

Balt. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **JOSEPH A. KRAMER**Age **25** Birthplace **MD.**
(State)Groom's
Residence **5604 HILLTOP AV.**Marital Status **SINGLE**Bride's
Name **VALERIE LYNN JANKOWIAK**Age **19** Birthplace **MD.**
(State)Bride's
Residence **4005 HAMILTON AV.**Marital Status **SINGLE**

Relationship to groom if any

NONEW. Francis Malooly
Name of Officiating Clergy or Authorized OfficerCatholic Priest

Title and Religious Denomination or Office

320 Cathedral St

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-19-85License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41764

LICENSE NO.

130474

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
NameBERRY NORRIS FISHERAge 29Birthplace N.C.
(State)

Groom's

Residence 2594 MINDI DR. CARROLL CO., MDMarital Status SINGLE

Bride's

Name SARA MARIE SCHMITTAge 26 Birthplace MD
(State)

Bride's

Residence 5955-B WESTERN RUN DR. 21209Marital Status SINGLE

Relationship to groom if any

NONELicense Date NOV. 12 85Conrad Schmitt

Name of Officiating Clergy or Authorized Officer

Catholic Priest.

Title and Religious Denomination or Office

1215 W. South ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-16-85License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41765

Certificate of Marriage

State of Maryland

LICENSE NO.

130215

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|----------------------------|----------------|-----------------|------------|------------------------|
| Groom's Name | DONALD K. KROHN | Age | 34 | Birthplace | N.Y. (State) |
| Groom's Residence | 3039 N. CALVERT ST. | Marital Status | DIVORCED | | |
| Bride's Name | ELVA E. HAZLEHURST | Age | 27 | Birthplace | PA. (State) |
| Bride's Residence | 3039 N. CLAVERT ST. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

ROBERT P. PATTERSON

Name of Officiating Clergy or Authorized Officer

RECTOR- CHURCH OF THE REDEEMER

Title and Religious Denomination or Office

5603 N. CHARLES ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41766

Certificate of Marriage

State of Maryland

LICENSE NO.
129984

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD LEO BOWINGS, JR**

Age **17** Birthplace **MD.**
(State)

Groom's Residence **1821 RAMSEY ST.**

Marital Status **SINGLE**

Bride's Name **MARGARET ELIZABETH DUNNIGAN**

Age **18** Birthplace **MD.**
(State)

Bride's Residence **1720 WILKENS AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

ARTHUR R. KENT

Name of Officiating Clergy or Authorized Officer

PASTOR- BEECHFIELD UNITED METH. CHURCH

Title and Religious Denomination or Office

541 S. BEECHFIELD AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **OCT 10 85**

JW

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41767

State of Maryland

LICENSE NO.

129718

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 17th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **DOUGLASS MORRIS**Age **33** Birthplace **MD.**
(State)Groom's
Residence **18 LINCOLN AVE. BALTO. CO., MD.** Marital Status **DIVORCED**Bride's
Name **KATHY MARIE ROBINSON**Age **34** Birthplace **MD.**
(State)Bride's
Residence **2608 N. AISQUITH STREET** Marital Status **SINGLE**Relationship to groom if any **NONE****CHARLES JAMES**

Name of Officiating Clergy or Authorized Officer

ASSOC. MINISTER- FIRST BAPT. CHURCH

Title and Religious Denomination or Office

2610 GARRETT AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985License Fee \$ 25.00**CHARLES J. JAMES**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41768

State of Maryland

LICENSE NO.
129488

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

CHARLES J COOK SR

Age 35 Birthplace MD.
(State)Groom's
Residence

2529 DENNISON ST

Marital Status DIVORCEDBride's
Name

DEBORAH E BELL

Age 36 Birthplace MD.
(State)Bride's
Residence

42 N BERNICE AVE

Marital Status DIVORCED

Relationship to groom if any

NONE

HARRY E. DIXON

Name of Officiating Clergyman or Authorized Officer

MINISTER- UNITED METH.

License Date SEPT 20 85

Title and Religious Denomination or Office

2049 WHEELER AVENUE

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 19 1985License Fee - Resident \$25.00
Non-Resident \$SAUNDRA E. BANKS, CLERK
Signature-Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41769

State of Maryland

LICENSE NO.

129133

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name LAWRENCE J. ZAMERSKI

Age 37 Birthplace MD.
(State)

Groom's Residence 2851 LAKE AVENUE

Marital Status DIVORCED

Bride's Name DELORES M. SVEZZESE

Age 43 Birthplace MD.
(State)

Bride's Residence 3536 DUDLEY AVENUE

Marital Status DIVORCED

Relationship to groom if any NONE

WILLIAM T. MILLER

Name of Officiating Clergyman or Authorized Officer

License Date SEPT. 25 85

CLERGY- METHODIST

Title and Religious Denomination or Office

4400 PARKSIDE DR.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature-Clerk of the Court

License Fee - Resident \$5.00
 Non-Resident \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41770

State of Maryland

LICENSE NO.

129301

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name GARY T GASKILL

Age 23

Birthplace

MD.

(State)

Groom's

Residence 2 A SOUTH HANSON ST TALBOT CO MD

Marital Status

SINGLE

Bride's

Name EVE M. SOMERS

Age 22

Birthplace

GERMANY

Bride's

Residence 606 WATERS ST DORCHESTER CO MD

Marital Status

SINGLE

(State)

Relationship to groom if any

NONE

BRENDAN T. CARR

Name of Officiating Clergyman or Authorized Officer

PASTOR- ROMAN CATHOLIC

Title and Religious Denomination or Office

4708 PRUDENCE ST.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee

\$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

13 SEP 85

2

Certificate of Marriage

85-41771

State of Maryland

LICENSE NO.

128966

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JAMES ALEX FLAGG

Age 39 Birthplace ILLINOIS (State)

Groom's Residence 5109 ARBUTUS AVENUE

Marital Status SINGLE

Bride's Name ROCHELLE PATRICE CRAWFORD

Age 27 Birthplace MARYLAND (State)

Bride's Residence 5109 ARBUTUS AVENUE

Marital Status SINGLE

Relationship to groom if any NONE

LAURA E. STEVENSON

Name of Officiating Clergyman or Authorized Officer

PASTOR- UNITED COUNCIL OF C C CHURCHES

Title and Religious Denomination or Office

5111 ARBUTUS AVE.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee

\$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41772

State of Maryland

LICENSE NO.

128931

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name KEVIN F. KOLUCH Age 23 Birthplace MD.
(State)
Groom's Residence 6922 GOUGH ST. Marital Status SINGLE
Bride's Name MELISSA A. MASSIMINI Age 21 Birthplace MD.
(State)
Bride's Residence 3541 MC SCHANE WAY BALTO.CO.,MD. Marital Status SINGLE
Relationship to groom if any NONE

MICHAEL D. SERGI

Name of Officiating Clergyman or Authorized Officer

PRIEST-ROMAN CATHOLIC

Title and Religious Denomination or Office

6420 EAST PRATT ST.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee

\$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41773

State of Maryland

LICENSE NO.
127562Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|----------------------|----------------|----------|------------|-----|
| Groom's Name | CARL W. HELMICK, JR. | Age | 42 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 1326 CAMBRIA ST. | Marital Status | DIVORCED | | |
| Bride's Name | BEVERLY J. FERRERI | Age | 23 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 1326 CAMBRIA ST. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

License Date JULY 16 85

tt

License Fee \$ 25.00

FRED H. MERCER

Name of Officiating Clergy or Authorized Officer

MINISTER- CHURCH OF GOD

Title and Religious Denomination or Office

3804 9th ST. 21225

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41774

LICENSE NO.

130404

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|-------------------------------|----------------|-----------------|------------|-----------------------|
| Groom's Name | STANLEY E. HENSON | Age | 45 | Birthplace | MD. (State) |
| Groom's Residence | 2926 ELLICOTT DRIVEWAY | Marital Status | DIVORCED | | |
| Bride's Name | CARMELITA S. CHAMPLIN | Age | 29 | Birthplace | MD. (State) |
| Bride's Residence | 905 KENWOOD AVE. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

License Date **NOV. 8 85**

MARK L. SAUNDERS

Name of Officiating Clergy or Authorized Officer

ASS'T PASTOR- NEW PSALMIST CHURCH

Title and Religious Denomination or Office

502 CATHEDRAL ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41775

State of Maryland

LICENSE NO.

130417

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LUTHER L JONES JR**
Groom's Residence **1355 STONEWOOD RD**Age **24** Birthplace **MD.**
(State)
Marital Status **SINGLE**Bride's Name **TERESA R JOHNSON**
Bride's Residence **3309 DOLFELD AVE**Age **26** Birthplace **ALA.**
(State)
Marital Status **SINGLE**

Relationship to groom if any

NONE**RICHARD R. HICKS**

Name of Officiating Clergy or Authorized Officer

ELDER- UNITED METH. CHURCH

Title and Religious Denomination or Office

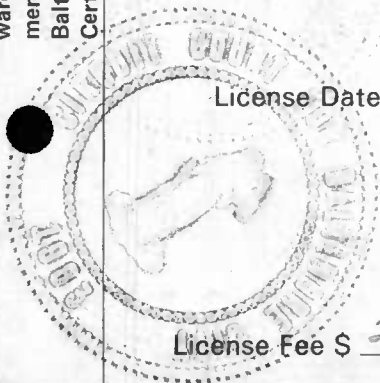
MORGAN CHRISTIAN CENTER

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
office on **NOV 20 1985**License Fee \$ **25.00****SAUNDEA E. BANKS, CLERK**
Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41776

LICENSE NO.

130477

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ALONZO NOVAK SELLERS

Age 27 Birthplace MD.
(State)

Groom's Residence 5333 GIST AV.

Marital Status SINGLE

Bride's Name EMMA S. TAYLOR

Age 35 Birthplace MD.
(State)

Bride's Residence 5333 GIST AV.

Marital Status DIVORCED

Relationship to groom if any NONE

ARTHUR J. BENN

Name of Officiating Clergy or Authorized Officer

License Date NOV 15 85

MINISTER- BAPTIST

Title and Religious Denomination or Office

1650 BURNWOOD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985

License Fee \$ 55.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41777

State of Maryland

LICENSE NO.

130484

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS ROBERT MERRYWEATHER**Age **19** Birthplace **MD.**
(State)Groom's Residence **967 HOMBERG AV. BALTO.CO.,MD**Marital Status **SINGLE**Bride's Name **JEANETTE MARIE WHITE**Age **20** Birthplace **MD.**
(State)Bride's Residence **967 HOMBERG AV. BALTO.CO.,MD**Marital Status **SINGLE**Relationship to groom if any **NONE****ROBERT T. WOODWORTH**

Name of Officiating Clergy or Authorized Officer

PASTOR- CHRIST & COUNTRY CHURCH

Title and Religious Denomination or Office

6020 OLD HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41778

LICENSE NO.

130500

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD JACKSON, JR**

Age **45** Birthplace **MD.**
(State)

Groom's Residence **1711 FULTON AV.**

Marital Status **DIVORCED**

Bride's Name **BARBARA TAYLOR**

Age **32** Birthplace **MD.**
(State)

Bride's Residence **1711 FULTON AV.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JAMES LANCE

Name of Officiating Clergy or Authorized Officer

ASSOC. MINISTER- NEW HOPE BAPTIST

Title and Religious Denomination or Office

850 HARLEM AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41779

State of Maryland

LICENSE NO.

130507

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---|----------------|-----------------|------------|------------|
| Groom's Name | FIRMADGE N. REIN, JR. | Age | 43 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 244 LORDBYRON LA. BALTO.CO., MD. | Marital Status | DIVORCED | | |
| Bride's Name | LINDA J. ERBE | Age | 30 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 244 LORDBYRON LA. BALTO.CO., MD. | Marital Status | DIVORCED | | |

Relationship to groom if any **NONE****ROBERT T. WOODWORTH**

Name of Officiating Clergy or Authorized Officer

PASTOR- CHRIST & COUNTRY CHURCH

Title and Religious Denomination or Office

6020 OLD HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41780

Certificate of Marriage

State of Maryland

LICENSE NO.

130510

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 17th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ALAN S. HESSAge 27 Birthplace N.Y.
(State)Groom's Residence 14640 MONMOUTH DR., MONT. CO., MD.Marital Status SINGLEBride's Name VICTORIA A. TOTTERAge 26 Birthplace N.Y.
(State)Bride's Residence 14640 MONMOUTH DR., MONT. CO., MD.Marital Status SINGLERelationship to groom if any NONERONALD S. FISHER

Name of Officiating Clergy or Authorized Officer

License Date NOV. 14

85

PRIEST- EPISCOPAL CHURCH

Title and Religious Denomination or Office

232 ST. THOMAS LANE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985SAUNDRA E. BANKS, CLERKLicense Fee \$ 55.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41781

LICENSE NO.

130556

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 17th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JOHN J. WOLFAge 21 Birthplace MD.
(State)Groom's Residence 4400 CLAREWAYMarital Status SINGLEBride's Name JILL H. ROBINSONAge 18 Birthplace MD.
(State)Bride's Residence 4400 CLAREWAYMarital Status SINGLERelationship to groom if any NONEDAVID W. RIMBACH

Name of Officiating Clergy or Authorized Officer

License Date NOV. 15 85MINISTER-UNITED METH. CHURCH

Title and Religious Denomination or Office

3449 FALLS RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 20 1985SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00This copy to be held by the Clerk of the Court, and for-
warded to the Division of Vital Records, State Depart-
ment of Health and Mental Hygiene, 201 W. Preston Street,
Baltimore, MD 21201, upon receipt of page 3, copy of
Certificate for Clerk of Court.

2

Certificate of Marriage

85-41782

State of Maryland

LICENSE NO.

130585

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 18th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

JAMES W TAYLORAge **63**Birthplace **N CAR**

(State)

Groom's Residence

3414 VIRGINIA AVE

Marital Status

WIDOWER

Bride's Name

LEATHA W CAPERSAge **48**Birthplace **S CAR**

(State)

Bride's Residence

4803 PALMER AVE

Marital Status

WIDOW

Relationship to groom if any

NONE**MILTON NELSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 18 85****PASTOR- THE LORD'S HOUSE IN CHURCH**

Title and Religious Denomination or Office

1418 W. LAFAYETTE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41783

State of Maryland

LICENSE NO.

130530

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PETER A. KAHN**

Age **37** Birthplace **N.Y.**
(State)

Groom's Residence **1404 MASON ST.**

Marital Status **SINGLE**

Bride's Name **GINA L. RALKE**

Age **27** Birthplace **CALIF.**
(State)

Bride's Residence **1404 MASON ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

DAVID W. MALONE

Name of Officiating Clergy or Authorized Officer

PASTOR- BROWN MEM. CHURCH

Title and Religious Denomination or Office

1316 PARK AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41784

Certificate of Marriage

State of Maryland

LICENSE NO.

130552

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 15th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RONALD WAYNE JUBB**
 Groom's Residence **525 N. BOULDIN ST.**
 Bride's Name **VALERIE LARAIN BENNETT**
 Bride's Residence **453 HORNEL ST.**

Age **26** Birthplace **MD.**
 (State)
 Marital Status **SINGLE**
 Age **22** Birthplace **MD.**
 (State)
 Marital Status **SINGLE**

Relationship to groom if any **NONE****JUDSON D. HULSEY**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 15 85****PASTOR- UNITED METH. CHURCH**

Title and Religious Denomination or Office

15922 A E MULLING RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 19 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41785

State of Maryland

LICENSE NO.

130527

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 17th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **PIETRO FRISONE**
Groom's
Residence **2719 PELHAM AVENUE**Age **26** Birthplace **ITALY**
(State)Marital Status **SINGLE**Bride's
Name **KIMBERLY ANN CUSICK**
Bride's
Residence **2725 PELHAM AVENUE**Age **25** Birthplace **MARYLAND**
(State)Marital Status **SINGLE**Relationship to groom if any **NONE**DAVID LEARY

Name of Officiating Clergy or Authorized Officer

ASSOC. PASTOR- SHRINE OF LITTLE FLOWER

Title and Religious Denomination or Office

2854 BRENDAN AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985**SABRINA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41786

State of Maryland

LICENSE NO.

130522

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KENNETH RORIE** Age **25** Birthplace **MD.**
(State)
Groom's Residence **817 GILRUBIN COURT** Marital Status **SINGLE**
Bride's Name **ALRTHIA LORRAINE JOHNSON** Age **21** Birthplace **MD.**
(State)
Bride's Residence **817 GILBURN COURT** Marital Status **SINGLE**
Relationship to groom if any **NONE**

SIMON SE SHAZO

Name of Officiating Clergy or Authorized Officer

ASS'T. PASTOR- MT. HEBRON BAPT. CHURCH

Title and Religious Denomination or Office

1030 EDMONDSON AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41787

LICENSE NO.

130519

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **HOWARD STEVEN TUCH**

Age **33** Birthplace **MASS.**
(State)

Groom's
Residence **1317 EUTAW PLACE**

Marital Status **SINGLE**

Bride's
Name **RUTH ELLEN GETTES**

Age **30** Birthplace **MASS.**
(State)

Bride's
Residence **76 DOGWOOD ACRES DR.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

ARYEH AZRIEL

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 14,**

85

RABBI- BALTO. HEBREW CONGREGATION

Title and Religious Denomination or Office

7401 PARK HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

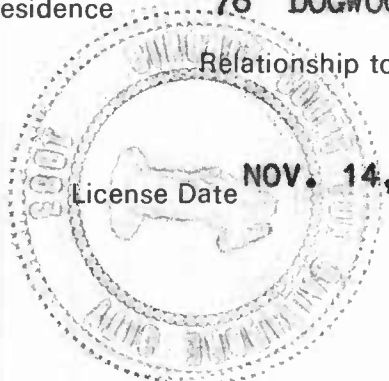
NOV 19 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41788

Certificate of Marriage

State of Maryland

LICENSE NO.

130518

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**GABLE R. TIGNEY**Age 50 Birthplace VA.
(State)Groom's
Residence**7225 JIM ROWE COURT**Marital Status SINGLEBride's
Name**RUBY L. ANDERSON**Age 40 Birthplace MD.
(State)

Bride's

Residence **7225 JIM ROWE COURT**Marital Status SINGLE

Relationship to groom if any

NONE**ALBERT C. GREENE, SR.**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 14, 85****PASTOR- GREATER MULBERRY BAPT. CHURCH**

Title and Religious Denomination or Office

418 E. CHASE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41789

LICENSE NO.
 130405

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 16 th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PAUL F. LUSBY**

Age **46** Birthplace **MD.**
 (State)

Groom's Residence **5526 HILLTOP AVE.**

Marital Status **DIVORCED**

Bride's Name **JOYCE A. DRISCOLL**

Age **36** Birthplace **MD.**
 (State)

Bride's Residence **3329 KENYON AVE.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

WILLIAM T. MILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV 12 85**

PASTOR- METH. CLERGY

Title and Religious Denomination or Office

JW

4400 PARKSIDE DR.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41790

Certificate of Marriage

State of Maryland

LICENSE NO.

130396

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOHN D RAVER

Age 21Birthplace MD.Groom's
Residence

3 MOPEC CIRCLE BALTO CO MD

Marital Status

(State)
SINGLEBride's
Name

ANN M CHMIELEWSKI

Age 19Birthplace MD.Bride's
Residence

3 MOPEC CIRCLE BALTO CO MD

Marital Status

(State)
SINGLE

Relationship to groom if any

NONE

WILLIAM E. POLK, JR.

Name of Officiating Clergy or Authorized Officer

PASTOR- BETHESDA UNITED METH. CHURCH

Title and Religious Denomination or Office

6300 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Date NOV 5 85

JW

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41791

LICENSE NO.

130555

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 18th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ESLEY LEONARD BRISSETT**

Age **37** Birthplace **MD.**
(State)

Groom's Residence **2211 MOUNT HOLLY ST.**

Marital Status **DIVORCED**

Bride's Name **MINNIE DAVIS JOHNSON**

Age **33** Birthplace **GA.**
(State)

Bride's Residence **2211 MOUNT HOLLY ST.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

VINCENT L. THOMPSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 18 85**

CLERGY - NEW SHOLOH BAPT. CHURCH

Title and Religious Denomination or Office

823 W. LANVALE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

License Fee \$ **25.00**

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41792

LICENSE NO.

130577

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|---|----------------|-------------|------------------------|---------------|
| Groom's Name | JOZEF BEDNAREK | Age | 29 | Birthplace | POLAND |
| Groom's Residence | 633 S POTOMAC ST | Marital Status | | <small>(State)</small> | SINGLE |
| Bride's Name | LYNETTE P TERRANOVA | Age | 24 | Birthplace | MD. |
| Bride's Residence | 1615 FOUR GEORGES CT BALTO CO MD | Marital Status | | <small>(State)</small> | SINGLE |
| Relationship to groom if any | | | NONE | | |

License Date

NOV 14 85

FRANCIS J. OKROY

Name of Officiating Clergy or Authorized Officer

ASSOC. PASTOR-HOLY ROSARY RRC CHURCH

Title and Religious Denomination or Office

408 S. CHESTER ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

License Fee \$ 25.00

SAUNDEA E. BANKS, CLERK
 Signature Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41793

Certificate of Marriage

State of Maryland

LICENSE NO.

130558

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HARRY C. HUGHES**Age **48** Birthplace **MD.**
(State)Groom's Residence **3709 WOODRIDGE ROAD**Marital Status **DIVORCED**Bride's Name **ALICE HERRING**Age **39** Birthplace **S.C.**
(State)Bride's Residence **3709 WOODRIDGE ROAD**Marital Status **SINGLE**Relationship to groom if any: **NONE****ALBERT C. GREENE, SR.**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 15 85****PASTOR - GREATER MULBERRY BAPT. CHURCH**

Title and Religious Denomination or Office

418 E. CHASE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41794

LICENSE NO.

130381

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DOUGLAS R. KRACH**

Age **28** Birthplace **MD.**
(State)

Groom's Residence **12699 LEE BEN RD. BALTO. CO., MD.** Marital Status **WIDOWER**

Bride's Name **LINDA A. GLEBAS**

Age **23** Birthplace **MD.**
(State)

Bride's Residence **1300 GRANDVIEW CT. HARFORD CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

ANTHONY S. DRANGINIS

Name of Officiating Clergy or Authorized Officer

PRIEST- CATHOLIC

Title and Religious Denomination or Office

114 W . SARATOGA ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

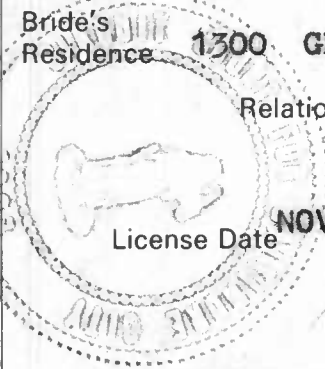
office on NOV 19 1985

License Fee \$ 25.00

SARAH E. DAVIS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41795

State of Maryland

LICENSE NO.

130379

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

ANDRE MATTHEW JEFFERSON

Age 22

Birthplace MD.
(State)

Groom's Residence

2592 W. FAYETTE STREET

Marital Status SINGLE

Bride's Name

YVETTE SAVOY

Age 20 Birthplace MD.
(State)

Bride's Residence

900 ARGYLE AVENUE

Marital Status SINGLE

Relationship to groom if any NONE

GEORGE W. JONES

Name of Officiating Clergy or Authorized Officer

PASTOR- MT. OLIVET CHRISTIAN CHURCH

Title and Religious Denomination or Office

230 N. FULTON AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date NOV 4 85

JW

License Fee \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41796

LICENSE NO.

130343

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

ROBERT D FORD

Age 26

Birthplace MD.
(State)

Groom's
Residence

3818 BROOKLYN AVE

Marital Status

SINGLE

Bride's
Name

PATRICIA N JUDY

Age 31

Birthplace MD.
(State)

Bride's
Residence

417 MAUDE AVE

Marital Status

DIVORCED

NONE

Relationship to groom if any

JOSEPH P. LETTRICH

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. JOHN

Title and Religious Denomination or Office

GLEN BURNIE, MD. 21061

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

NOV. 4 85

TT

License Fee \$ 25.00

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2

Certificate of Marriage

85-41797

State of Maryland

LICENSE NO.

130329

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD K NIELSEN**

Age **32** Birthplace **MD.**
(State)

Groom's Residence **3419 PINWOOD AVE**

Marital Status **DIVORCED**

Bride's Name **THERESA A HOLMES**

Age **35** Birthplace **MD.**
(State)

Bride's Residence **3419 PINWOOD AVE**

Marital Status **DIVORCED**

Relationship to groom if any

NONE

CLIFFORD P. LLOYD

Name of Officiating Clergy or Authorized Officer

85 MINISTER- UNITED METH. CHURCH

Title and Religious Denomination or Office

5315 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

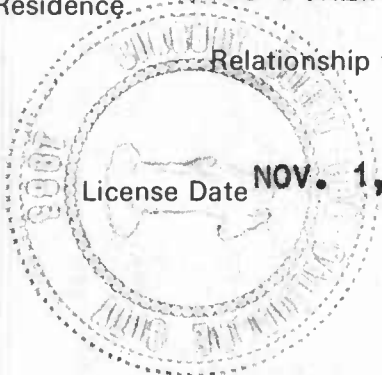
NOV 19 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41798

Certificate of Marriage

State of Maryland

LICENSE NO.

130318

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 17th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TODD EDWARD KOGAN**Age **26** Birthplace **MD.**
(State)Groom's Residence **6407 APOLLO DR.**Marital Status **SINGLE**Bride's Name **KORI JILL HAMBURG**Age **24** Birthplace **MD.**
(State)Bride's Residence **7429 RICKSWAY**Marital Status **SINGLE**Relationship to groom if any **NONE****DONALD R. BERLIN**

Name of Officiating Clergy or Authorized Officer

85 RABBI- TEMPLE OHEB SHALOM

Title and Religious Denomination or Office

7310 PARK HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00License Date **NOV. 5,**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41799

Certificate of Marriage

State of Maryland

LICENSE NO.

130270

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of NOV. 1985the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **GARY STEPHON BURNETT**Age **24** Birthplace **S.C.**
(State)Groom's
Residence **6402 ELLIOT PL. P.G. CO., MD.**Marital Status **SINGLE**Bride's
Name **NIKKI LYNN BROOKS**Age **23** Birthplace **VT.**
(State)Bride's
Residence **3000 ROCKWOOD AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****LANCE A.B. GIFFORD**

Name of Officiating Clergy or Authorized Officer

License Date

OCT 31 85**RECTOR- ST. JOHN'S CHURCH**

Title and Religious Denomination or Office

SOUTH RD., MT. WASHINGTON

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41800

LICENSE NO.

130371

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 5th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FRED L. FELDER**

Age **53** Birthplace **S.C.**
(State)

Groom's Residence **3104 OAKFORD AVENUE**

Marital Status **SINGLE**

Bride's Name **MABLE ANDERSON**

Age **38** Birthplace **S.C.**
(State)

Bride's Residence **1803 N. SMALLWOOD STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

PAUL FELDER

Name of Officiating Clergy or Authorized Officer

ASSOC. MINISTER- CHRISTIAN MEMORIAL

Title and Religious Denomination or Office

3106 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOV 5 1985**

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41801

LICENSE NO.

130238

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

JAMES J COOPER

Age 27

Birthplace

PA.

(State)

Groom's Residence

3406 OFFUTT RD BALTO CO MD

Marital Status

SINGLE

Bride's Name

CATHY L MARSTELLER

Age 23

Birthplace

MD.

(State)

Bride's Residence

21624 MIDDLETOWN RD BALTO CO MD

Marital Status

SINGLE

NONE

Relationship to groom if any

JOHN J. PADIAN

Name of Officiating Clergy or Authorized Officer

License Date OCT. 24

85

DELEGATED VICAR- ALL SAINTS CHURCH

Title and Religious Denomination or Office

4408 LIBERTY HGTS. AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

tt

NOV 8 1985

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41802

LICENSE NO.
 130127

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 1st day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD L. FORD**

Age **66** Birthplace **MD.**
 (State)

Groom's Residence **5525 WALTHER AVE.**

Marital Status **DIVORCED**

Bride's Name **PATRICIA L. ISENNOCK**

Age **50** Birthplace **MD.**
 (State)

Bride's Residence **5525 WALTHER AVE.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

DAVID H. MANRODT

Name of Officiating Clergy or Authorized Officer

PASTOR- JERUSALEM EV. FAITH CHURCH

Title and Religious Denomination or Office

4601 BELAIR RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on

NOV 8 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41803

Certificate of Marriage

State of Maryland

LICENSE NO.

129537

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES ESSICK GAYLORD**Age **29** Birthplace **MD.**
(State)Groom's Residence **1309 HILLMAN ST. 21202**Marital Status **SINGLE**Bride's Name **DENISE CECELIA CARTER**Age **29** Birthplace **MD.**
(State)Bride's Residence **710 E. PRESTON ST 21202**Marital Status **SINGLE**Relationship to groom if any **NONE****WILLIE S. CHAMBERS**

Name of Officiating Clergyman or Authorized Officer

License Date **SEPT 19 85****PASTOR- NEW ANTIOCH BAPT. CHURCH**

Title and Religious Denomination or Office

1325 MAPLE AVE.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 7 1985**SAUNDRA E. BANKS, CLERK**

Signature-Clerk of the Court

License Fee - Resident \$ **25.00**
Non-Resident \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41804

Certificate of Marriage

State of Maryland

LICENSE NO.

130140

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FREEMAN J. ROBINSON, JR.**Age **31**Birthplace **MD.**
(State)Groom's Residence **3331 MONDAWMIN AVENUE**Marital Status **DIVORCED**Bride's Name **CHERYL A. C..BROWN**Age **28**Birthplace **MD.**
(State)Bride's Residence **3015 OAKHILL AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****DOUGLAS B. SANDS**

Name of Officiating Clergy or Authorized Officer

PASTOR- HOWARD PK. UNITED METH. CHURCH

Title and Religious Denomination or Office

5020 GWYNN OAK AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 7 1985License Fee \$ 25.00**SANDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41805

State of Maryland

LICENSE NO.

130274

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 3rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DANIEL BLAIR BROWN** Age **24** Birthplace **ARIZONA**
(State)
Groom's Residence **4193 MC DOWELL LA. BALTO. CO., MD.** Marital Status **SINGLE**
Bride's Name **ESTHER DABBAH** Age **22** Birthplace **MARYLAND**
(State)
Bride's Residence **4381 CRESTHEIGHTS DR. BALTO. CO., MD.** Marital Status **SINGLE**
Relationship to groom if any **NONE**

HAROLD S. WHITE

Name of Officiating Clergy or Authorized Officer

RABBI- JUDAISM

Title and Religious Denomination or Office

1099 22nd ST. N W WASHINGTON, D.C.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 7 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **OCT. 28 85**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41806

LICENSE NO.

130419

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Ma
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARK DAVID SHERINSKY**Age **22** Birthplace **MD.**
(State)Groom's Residence **1326 SPRIN AVE. BALTO. CO., MD.**Marital Status **SINGLE**Bride's Name **CHRISTINE MARIE KENDZEJESKI**Age **19** Birthplace **FD.**
(State)Bride's Residence **6914 RIDGEWAY RD. BALTO. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE**

License Date

NOV. 6**85****JW**

Name of Officiating Clergy or Authorized Officer

Catholic Priest
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

600 S. Conkey ST

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-12-85

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41807

Certificate of Marriage

State of Maryland

LICENSE NO.

130422

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 7th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES HEMPHILL**Age **28**Birthplace **MD.**
(State)Groom's Residence **1832 RUTLAND AVE**

Marital Status

SINGLEBride's Name **CYNTHIA A JONES**Age **23**Birthplace **MD.**
(State)Bride's Residence **1623 W MULBERRY ST**

Marital Status

DIVORCED
(State)**NONE**

Relationship to groom if any

License Date **NOV. 6****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-12-85

License Fee \$

25.00**SAUNDRA E. BARKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41808

LICENSE NO.

130429

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 7th day of Nov. 19 85

the following persons were by me united in marriage at

Balti. Md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

KENNETH WESLEY HARN, JR

Age **44**

Birthplace

MD.
(State)

Groom's

Residence **214 e. FORT AV.**

Marital Status **DIVORCED**

Bride's

Name **ANNA H. WOOTON**

Age **30**

Birthplace

pa.
(State)

Bride's

Residence **214 E. FORT AV.**

Marital Status **DIVORCED**

Relationship to groom if any

NONE

License Date **NOV. 7,**

85

James Hoffman
Name of Officiating Clergy or Authorized Officer

Lutheran Minister
Title and Religious Denomination or Office

214 E. Randall ST
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41809

Certificate of Marriage

State of Maryland

LICENSE NO.

130447

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8th day of Nov. 1985

the following persons were by me united in marriage at

Balti Md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **PHILIP BERNARD SMITH**Age **19** Birthplace **MD.**
(State)Groom's
Residence **505 RANDOM ROAD**Marital Status **SINGLE**Bride's
Name **YOLANDA ALVINIA STEWART**Age **18** Birthplace **MD.**
(State)Bride's
Residence **3817 SYLVAN DR. BALTO. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE**Carrington D. Carter

Name of Officiating Clergy or Authorized Officer

Minister

Title and Religious Denomination or Office

Balti Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-12-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41810

State of Maryland

LICENSE NO.

130373

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 1985the following persons were by me united in marriage at Balto. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JEREMIAH C. LEAK** Age **23** Birthplace **MD.**
(State)Groom's Residence **7139 ROLLING BEND RD. BALTO. CO., MD.** Marital Status **SINGLE**Bride's Name **DAPHNE C. YERBY** Age **24** Birthplace **MD.**
(State)Bride's Residence **1922 N. BENTALOU STREET** Marital Status **SINGLE**Relationship to groom if any **NONE**Aggie L. Brown
Name of Officiating Clergy or Authorized OfficerMinister
Title and Religious Denomination or Office5414 West Ave.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

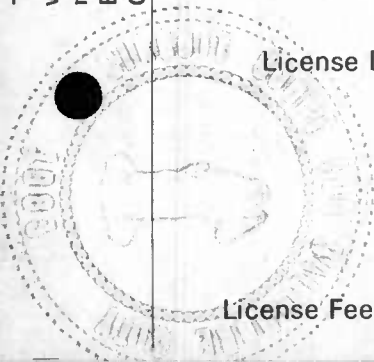
office on

11-12-85
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **NOV. 4** **85**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41811

LICENSE NO.

130351

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 6th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JIMMIE BROWN JR

Age 43 Birthplace

LA
(State)

Groom's
Residence

89 AMBO CIRCLE BALTO CO MD

Marital Status

DIVORCED

Bride's
Name

JEANNETTE PRYOR

Age 31 Birthplace

MD.
(State)

Bride's
Residence

89 AMBO CIRCLE BALTO CO MD

Marital Status

DIVORCED

NONE

Relationship to groom if any

VERNON WHITEMAN

Name of Officiating Clergy or Authorized Officer

License Date

NOV 5

85

ELDER- JEHOVAH'S WITNESSES

Title and Religious Denomination or Office

6 E. HICKAM RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on:

NOV 12 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41812

Certificate of Marriage

State of Maryland

LICENSE NO.

130341

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 6th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|----------------------------------|----------------|-----------------|------------|------------|
| Groom's Name | BENJAMIN F. SAVAGE | Age | 64 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 4020 N. ROGER AVE. APT. A | Marital Status | DIVORCED | | |
| Bride's Name | ANNABELLE SMITH | Age | 65 | Birthplace | VA. |
| | | | | (State) | |
| Bride's Residence | 4020 N. ROGER AVE. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

License Date **NOV. 1, 85****ROBIN BRUNSON**

Name of Officiating Clergy or Authorized Officer

ELDER- APOSTOLIC HOLINESS CHURCH

Title and Religious Denomination or Office

604 N. DENISON STREET

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41813

State of Maryland

LICENSE NO.

130340

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 8th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MICHAEL A. STERLING Age 24 Birthplace MD.
(State)

Groom's Residence 1119 SANDYSTONE RD. BALTO. CO., MD Marital Status SINGLE

Bride's Name ANGELA F. BOZEMAN Age 24 Birthplace MD.
(State)

Bride's Residence 1119 SANDYSTONE RD. BALTO. CO., MD Marital Status SINGLE

Relationship to groom if any NONE

DIANE A. WAGNER

Name of Officiating Clergy or Authorized Officer

License Date NOV. 5 85

MINISTER- MEMORIAL UNITED METH. CHURCH

Title and Religious Denomination or Office

3340 FREDERICK AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 12 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

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2

85-41814

Certificate of Marriage

State of Maryland

LICENSE NO.

130308

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HARRY SHAVER**Age **61** Birthplace **VA.**
(State)Groom's Residence **1056 LEREW WAY**Marital Status **DIVORCED**Bride's Name **CYNTHIA V. COLEBURN**Age **31** Birthplace **MD.**
(State)Bride's Residence **1056 LEREW WAY**Marital Status **DIVORCED**Relationship to groom if any **NONE****ALFRED B. MC CAULEY**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 31 85****PASTOR- FAITH CHRISTIAN OUTREACH**

Title and Religious Denomination or Office

990 9th ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985License Fee \$ **25.00****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41815

LICENSE NO.

130227

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 8th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS PAUL WHITE** Age **22** Birthplace **MARYLAND**
(State)
Groom's Residence **7802 WYNBROOK RD. BALTO.CO., MD** Marital Status **SINGLE**
Bride's Name **VICTORIA LEE GOLES** Age **21** Birthplace **MARYLAND**
(State)
Bride's Residence **1709 TURKEY POINT RD. BALTO.CO., MD** Marital Status **DIVORCED**
Relationship to groom if any **NONE**

JOHN O'TOOLE

Name of Officiating Clergy or Authorized Officer

License Date **NOV 1 85**

PRIEST-ROMAN CATHOLIC

Title and Religious Denomination or Office

JW

6420 E. PRATT ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985
SARAH E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41816

Certificate of Marriage

State of Maryland

LICENSE NO.

130214

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 6th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DONALD L. BROWN** Age **29** Birthplace **MD.**
(State)
Groom's Residence **1157 N. STRICKER ST.** Marital Status **SINGLE**
Bride's Name **LINDA C. HALL** Age **30** Birthplace **VA.**
(State)
Bride's Residence **1157 N. STRICKER ST.** Marital Status **DIVORCED**
Relationship to groom if any **NONE**

License Date **OCT 23 85****JAMES E. MASON, III**

Name of Officiating Clergy or Authorized Officer

PASTOR-FAITH MESSAGE

Title and Religious Denomination or Office

69151 DIGBY RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41817

Certificate of Marriage

State of Maryland

LICENSE NO.

130157

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 3rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name VINCENT A. JOHNSAge 33 Birthplace MD.
(State)

Groom's

Residence 3805 E. PRATT ST.Marital Status DIVORCED

Bride's

Name AUDREY MARIE MC KEEAge 29 Birthplace MD.
(State)

Bride's

Residence 5521 SEPTON AVE.Marital Status SINGLERelationship to groom if any NONE

JOHN T. WIELEBSKI

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC CHURCH

Title and Religious Denomination or Office

5310 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41818

Certificate of Marriage

State of Maryland

LICENSE NO.

130081

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EARL VICK**Age **25**Birthplace **MD.**

(State)

Groom's Residence **3403 DUVAL AVE**

Marital Status

SINGLEBride's Name **DEIZSHEL J SETZER**Age **20**Birthplace **MD.**

(State)

Bride's Residence **3403 DUVAL AVE**

Marital Status

SINGLE**NONE**

Relationship to groom if any

ROBERT C. HUNT

Name of Officiating Clergy or Authorized Officer

PASTOR

Title and Religious Denomination or Office

3459 PARK HEIGHTS AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

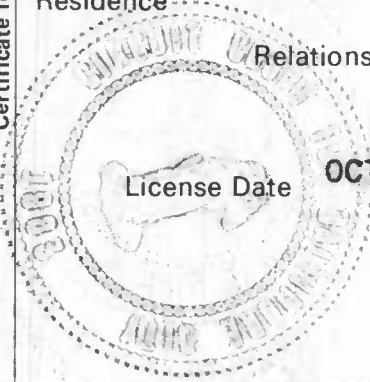
I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41819

Certificate of Marriage

State of Maryland

LICENSE NO.

129654

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY LAMAR DUBLIN**Age **22** Birthplace **ILLINOIS**
(State)Groom's Residence **3701 FRANKLYN AVENUE**Marital Status **SINGLE**Bride's Name **MELISSA BEZURN**Age **19** Birthplace **MARYLAND**
(State)Bride's Residence **2544 OSWEGO AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****CHOYCE HALL**License Date **SEPT 25 85**Name of Officiating Clergy or Authorized Officer
PASTOR- ST. JOHN'S EVAN. LUTHERAN CHURCHTitle and Religious Denomination or Office
1731 E. 35th ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41820

Certificate of Marriage

State of Maryland

LICENSE NO.
129860

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1st day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|----------------------------------|----------------|---------------|------------|------------|
| Groom's Name | ROBERT G. HENRY | Age | 27 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 5723 CEDONIA AVE. APT. D. | Marital Status | SINGLE | | |
| Bride's Name | LINDA A. BINIASZ | Age | 28 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 5723 CEDONIA AVE. | Marital Status | SINGLE | | |

Relationship to groom if any **NONE****JOHN STEPHEN FAIR**

Name of Officiating Clergy or Authorized Officer

85 PASTOR- UNITED CHURCH OF CHRIST

Title and Religious Denomination or Office

3200 DILLON ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

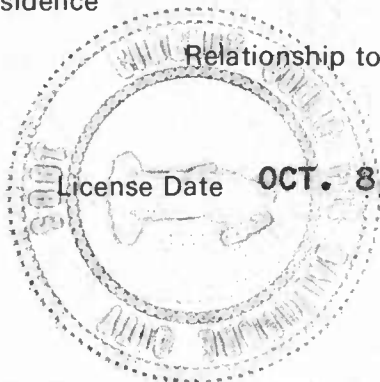
office on

NOV 8 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41821

State of Maryland

LICENSE NO.

130354

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 3rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTOINE DERRICK IRVING**

Age **24** Birthplace **MD.**
(State)

Groom's Residence **556 ORCHARD ST.**

Marital Status **SINGLE**

Bride's Name **LAURA LEE WHITE**

Age **21** Birthplace **MASS.**
(State)

Bride's Residence **556 ORCHARD ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

WATTIE ELRIDGE

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1 85**

PASTOR- FAITH BAPTIST CHURCH

Title and Religious Denomination or Office

833 N. BOND ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

TT

2

Certificate of Marriage

State of Maryland

85-41822

LICENSE NO.

130317

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

WILBUR LEWISAge **43**Birthplace **N CAR**

(State)

Groom's Residence

432 S PATTERSON PK AVE

Marital Status

DIVORCED

Bride's Name

PATRICIA A SPRINGAge **37**Birthplace **CONN**

(State)

Bride's Residence

432 S PATTERSON PK AVE

Marital Status

SINGLE**NONE**

Relationship to groom if any

CLYDE OXENDINE

Name of Officiating Clergy or Authorized Officer

PASTOR- NON- DENOMINATIONAL

Title and Religious Denomination or Office

5 NERBOY RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

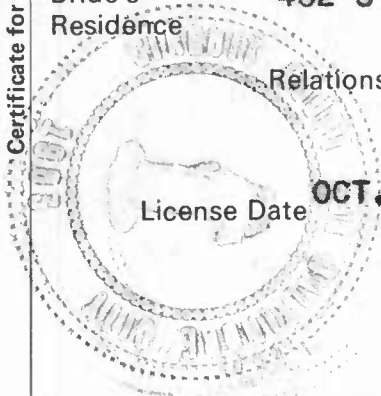
License Date

OCT. 31,**85**

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41823

State of Maryland

LICENSE NO.

129576

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|---|----------------|---------------|------------|-------------|
| Groom's Name | STUART L. FRIEDRICH | Age | 37 | Birthplace | N.J. |
| | | | | (State) | |
| Groom's Residence | 1441 FOREST PARK AVE. BALTO.CO., MD. | Marital Status | SINGLE | | |
| Bride's Name | LYELL G. WALTON | Age | 31 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 2 HADDON CT. BALTO.CO., MD. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

RICHARD W. LIPKA

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. MARY'S CHURCH

Title and Religious Denomination or Office

3900 ROLAND AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

OCT 4 1985

JW

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41824

State of Maryland

LICENSE NO.

130458

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 10 day of Nov. 1985

the following persons were by me united in marriage at

Balto. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**ROBERT DAVID PRINCE**Age **26**

Birthplace

MD.
(State)Groom's
Residence**1619 OLD EASTERN AVE. BALTO.CO., MD.**Marital Status **SINGLE**Bride's
Name**KAREN LEE PARKER**Age **22**

Birthplace

MD.
(State)Bride's
Residence**1619 OLD EASTERN AVE. BALTO.CO., MD.**Marital Status **SINGLE**

Relationship to groom if any

NONELicense Date **NOV. 8,****85**D. Lee Hudson

Name of Officiating Clergy or Authorized Officer

Lutheran Minister

Title and Religious Denomination or Office

Balto. Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK11-13-85License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41825

LICENSE NO.

130466

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8th day of Nov. 19 85the following persons were by me united in marriage at _____
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

DAVID L OXENDINE

Age 30

Birthplace

N CAR

(State)

Groom's
Residence

1619 DOLITTLE RD BALTO CO MD

Marital Status

SINGLE

Bride's
Name

DORIS L CRANE

Age 23

Birthplace

MD.

(State)

Bride's
Residence

1619 DOLITTLE RD BALTO CO MD

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date NOV. 8

85

Farnest Jones

Name of Officiating Clergy or Authorized Officer

Methodist

Title and Religious Denomination or Office

1519 Church St.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41826

LICENSE NO.

130323

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 10th day of Nov. 1985

the following persons were by me united in marriage at

Balti Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

WILLIAM J SIEMEK

Age

31

Birthplace

MD.

(State)

Groom's
Residence

3306 RICHMOND AVE

Marital Status

DIVORCED

Bride's
Name

TAMMY S LONG

Age

21

Birthplace

MD.

(State)

Bride's
Residence

3306 RICHMOND AVE

Marital Status

SINGLE

NONE

Relationship to groom if any

License Date OCT. 31

85

TT

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41827

Certificate of Marriage

State of Maryland

LICENSE NO.

130335

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 16th day of Nov. 1985

the following persons were by me united in marriage at

Balto. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**JAMES ARMSTRONG BURTON**

Age

38 Birthplace**VA.**
(State)Groom's
Residence**3934 EDNOR ROAD**

Marital Status

DIVORCEDBride's
Name**JEANNE LAMPARTY BRINKLEY**

Age

37 Birthplace**WASH., D.C.**
(State)Bride's
Residence**3934 EDNOR ROAD**

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date

NOV 1 85

Name of Officiating Clergy or Authorized Officer

Minister

Title and Religious Denomination or Office

921 E. Belvedere Ave.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41828

State of Maryland

LICENSE NO.

130378

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 1985

the following persons were by me united in marriage at

Balt.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOSEPH J SPRINKEL**Age **22**Birthplace **TEXAS**
(State)Groom's Residence **479 WHITEHAVEN CT A.A.CO.MD**Marital Status **SINGLE**Bride's Name **BONNIE J KESSLER**Age **23**Birthplace **MD.**
(State)Bride's Residence **2213 WILKINS AVE**Marital Status **SINGLE**

Relationship to groom if any

NONELicense Date **NOV. 6 85**Paschal Morlino

Name of Officiating Clergy or Authorized Officer

Catholic Priest

Title and Religious Denomination or Office

2612 Wilkens Ave.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41829

Certificate of Marriage

State of Maryland

LICENSE NO.

130382

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 1985the following persons were by me united in marriage at Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **WILLIAM H. GILMORE**Age **44** Birthplace **VA.**
(State)Groom's
Residence **909 ARGONNE DRIVE**Marital Status **DIVORCED**Bride's
Name **VALJEAN GREEN**Age **35** Birthplace **VA.**
(State)Bride's
Residence **909 ARGONNE DRIVE**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **NOV 4 85**

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 11-13-85**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41830

Certificate of Marriage

State of Maryland

LICENSE NO.

130406

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

LEON W. TERRY

Age 36 Birthplace MD.
(State)Groom's
Residence

4137 MT WOOD ST

Marital Status SINGLEBride's
Name

MARY L JORDAN

Age 38 Birthplace MD
(State)Bride's
Residence

4137 MT WOOD ST

Marital Status DIVORCED

Relationship to groom if any

NONE

License Date

NOV 6 85

JW

Neal Gulchrist

Name of Officiating Clergy or Authorized Officer

Minister

Title and Religious Denomination or Office

2417 Loyola Southway

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85

License Fee \$

25.00SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41831

Certificate of Marriage

State of Maryland

LICENSE NO.

130438

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 19 85

the following persons were by me united in marriage at

Balti Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **MICHAEL SMALLS**Age **31**Birthplace **MD.**
(State)

Groom's

Residence **1211 OLIVER ST.**Marital Status **DIVORCED**

Bride's

Name **RENEE I. RICHARDSON**Age **26** Birthplace **MD.**
(State)

Bride's

Residence **1211 OLIVER ST.**Marital Status **WIDOW**

Relationship to groom if any

NONELicense Date **NOV. 7** **85**

TT

Alfred Doodle
Name of Officiating Clergy or Authorized OfficerBaptist Minister
Title and Religious Denomination or OfficeBalti Md.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
office on 11-13-85**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41832

Certificate of Marriage

State of Maryland

LICENSE NO.

130449

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **JAMES EUGENE COLLINS**Age **26**

Birthplace

NEW JERSEY

(State)

Groom's

Residence **3427 CARRIAGE HILL CIR. BALTO.CO., MD**

Marital Status

SINGLE

Bride's

Name **LYNNE ALIECE HARPER**Age **18**

Birthplace

MD.

(State)

Bride's

Residence **3427 CARRIAGE HILL CIR. BALTO.CO., MD**

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

NOV. 8,**85**

Name of Officiating Clergy or Authorized Officer

Matie Moore
Minister

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

Balti. Md.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41833

Certificate of Marriage

State of Maryland

LICENSE NO.
130454

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **TYRONE M. GAINES**Age **31** Birthplace **MD.**
(State)Groom's
Residence **717 NEWINGTON AVENUE**Marital Status **SINGLE**Bride's
Name **ROSALYN ADAIR MADDOX**Age **30** Birthplace **MD.**
(State)Bride's
Residence **626 N. AUGUSTA AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 8 85**Daniel Mc Lellan

Name of Officiating Clergy or Authorized Officer

Methodist Minister

Title and Religious Denomination or Office

700 Wildwood PKWY

Address of Clergy or Authorized Office

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK11-13-85License Fee \$ 55.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41834

LICENSE NO.

130456

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 19 85

the following persons were by me united in marriage at

Baltimore
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES ANDREW TUSSING**Age **25** Birthplace **VA.**
(State)Groom's Residence **3926 FAIT AVENUE**Marital Status **DIVORCED**Bride's Name **CHRISTINA MARIE LUDWIG**Age **18** Birthplace **MD.**
(State)Bride's Residence **3926 FAIT AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 8 85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41835

LICENSE NO.

130435

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 12th day of NOVEMBER 19 85
BALTIMORE, MD.

the following persons were by me united in marriage at _____
(City or Town)
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID O. WILLIAMS**

Age **24** Birthplace **MD.**

Groom's Residence **2309 BARCLAY ST.**

Marital Status

(State)
SINGLE

Bride's Name **SHARON CARTER**

Age **24** Birthplace **MD.**

Bride's Residence **5300 LOCH RAVEN BLVD.**

Marital Status

(State)
SINGLE

Relationship to groom if any **NONE**

RICHARD HALL

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 8 85**

ELDER APOSTOLIC FAITH

Title and Religious Denomination or Office

509 N. EDGEWOOD ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 14 1985

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41836

State of Maryland

LICENSE NO.

130398

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HORACE L. MONTAGUE**

Age **41** Birthplace **MD.**
(State)

Groom's Residence **2440 W. COLD SPRING LANE**

Marital Status **DIVORCED**

Bride's Name **CORA LEE CHERRY**

Age **44** Birthplace **VA.**
(State)

Bride's Residence **2440 W. COLD SPRING LANE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

REV. HATTIE MAE REDD

Name of Officiating Clergy or Authorized Officer

PASTOR

Title and Religious Denomination or Office

1315 LAFAYETTE AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

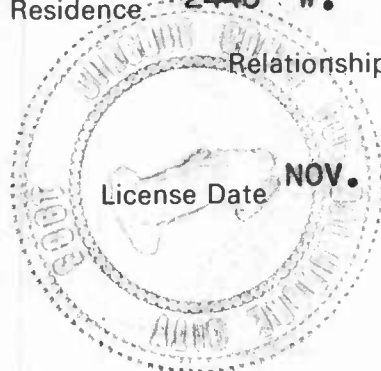
I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41837

LICENSE NO.

130261

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID PAUL RACHUBA**

Age **28** Birthplace **MD.**
(State)

Groom's Residence **1602 RITA RD. BALTO.CO.,MD**

Marital Status **SINGLE**

Bride's Name **JOYCE ANN KUTA**

Age **24** Birthplace **MD.**
(State)

Bride's Residence **2720 MOORGATE RD. BALTO.CO.,MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

REV. RICHARD E. PARKS, PASTOR

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 28 85**

SACRED HEART OF MARY CHURCH

Title and Religious Denomination or Office

TT

6736 YOUNGSTOWN AV. 21222

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41838

Certificate of Marriage

State of Maryland

LICENSE NO.

130237

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 1985BALTIMORE, MD.the following persons were by me united in marriage at _____
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KEVIN LBE CLARK**
 Groom's Residence **525 E. PATAPSCO AV.**
 Bride's Name **DARLENE ARLETTE CINNAMON**
 Bride's Residence **1517 SYCAMORE ST.**

Age **26** Birthplace **MD.**
 (State)
 Marital Status **SINGLE**
 Age **20** Birthplace **MD.**
 (State)
 Marital Status **SINGLE**

Relationship to groom if any **NONE**License Date **OCT 28 85**

JW

GEORGE E. TUTTLE

Name of Officiating Clergy or Authorized Officer

PASTOR THE AMERICA LUTHERAL CHURCH

Title and Religious Denomination or Office

312 16th AVE BALTIMORE, MD. 21225

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41839

State of Maryland

LICENSE NO.

130132

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

KENNETH H BUCKLEW

Age 44Birthplace MD.
(State)Groom's
Residence

335 S FURROW ST

Marital Status DIVORCEDBride's
Name

CECELIA A ROBBINS

Age 44 Birthplace MD.
(State)Bride's
Residence

335 S FURROW ST

Marital Status DIVORCED

Relationship to groom if any

NONE

ARTHUR R. KENT

Name of Officiating Clergy or Authorized Officer

BEECHFIELD UNITED METHODIST CHURCH

Title and Religious Denomination or Office

541 S. BEECHFIELD AV. BALTIMORE, MD. 21229

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985

SANDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date NOV. 4,85License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41840

LICENSE NO.
129973

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT JOHNSON**

Age **45** Birthplace **MD.**
(State)

Groom's Residence **1110 FULTON AV.**

Marital Status **SINGLE**

Bride's Name **EVELYN DEAN**

Age **43** Birthplace **MD.**
(State)

Bride's Residence **2107 CLIFTWOOD AV.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

CARROLL R. MITCHELL

Name of Officiating Clergy or Authorized Officer

MINISTER EKKLISIA BIBLE CHAPEL

Title and Religious Denomination or Office

1628 E. 30th ST BALTIMORE MD. 21218

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985 NOV 14 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41841

Certificate of Marriage

State of Maryland

LICENSE NO.

130197

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1st day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL GEORGE CAMPBELL**Age **30** Birthplace **JAMAICA**
(State)Groom's Residence **4015 FAIRVIEW AV.**Marital Status **SINGLE**Bride's Name **ARLENE PATRICIA POWELL**Age **25** Birthplace **MD.**
(State)Bride's Residence **224 N. MONROE ST**Marital Status **SINGLE**Relationship to groom if any **NONE****GREGORY C. TURNER**

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. JOHN'S BAPT. CHURCH

Title and Religious Denomination or Office

2929 DUPONT AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41842

State of Maryland

LICENSE NO.

130232

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **STANLEY H. WATERS**

Age **33** Birthplace **MD.**
(State)

Groom's Residence **2702 SPAUDLING AVE.**

Marital Status **DIVORCED**

Bride's Name **ROBIN E. BROWN**

Age **29** Birthplace **MD.**
(State)

Bride's Residence **3224 GWYNN FALLS PARKWAY**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

WENDELL H. PHILLIPS

Name of Officiating Clergy or Authorized Officer

MINISTER -U C C

Title and Religious Denomination or Office

3106 LIBERTY HGTS. AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **OCT. 25,**

85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41843

LICENSE NO.

130243

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

MARK KOZAK

Age 27

Birthplace PA.
(State)

Groom's Residence

693 GLADSTONE AVENUE

Marital Status SINGLE

Bride's Name

ELIZABETH PAGE OTENASEK

Age 25 Birthplace MD.
(State)

Bride's Residence

10 TUNBRIDGE ROAD

Marital Status SINGLE

Relationship to groom if any

NONE

RAYMOND CHASE

Name of Officiating Clergy or Authorized Officer

License Date OCT. 25 85

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41844

Certificate of Marriage

State of Maryland

LICENSE NO.

130247

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**KENNETH LOMOTTE PRIMEAUX**Age **21**

Birthplace

MD.

(State)

Groom's
Residence**1128 E. FAYETTE STREET**

Marital Status

SINGLEBride's
Name**ANNETTE SIMPSON**Age **19**

Birthplace

MD.

(State)

Bride's

Residence

1128 E. FAYETTE STREET

Marital Status

SINGLE

Relationship to groom if any

NONE**MAMIE A. WILLIAMS**

Name of Officiating Clergy or Authorized Officer

PASTOR- CENTENNIAL U M C

Title and Religious Denomination or Office

1029 E. MONUMENT ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41845

State of Maryland

LICENSE NO.

130256

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **BOBBY CAPERS**

Age 34 Birthplace **S. CAROLINA**
(State)

Groom's
Residence **2167 PENTWOOD DRIVE**

Marital Status **SINGLE**

Bride's
Name **WANDA E. BARNES**

Age 30 Birthplace **MARYLAND**
(State)

Bride's
Residence **2167 PENTWOOD DRIVE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

ISAIAH B. CLARKE

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 28 85**

ASS'T PASTOR- ANTIOCH MEM. BAPT. CHURCH
Title and Religious Denomination or Office

5632 ARNHEIM RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985

License Fee \$ 55.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41846

 LICENSE NO.
130268

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
I Hereby Certify that on the 8th day of NOVEMBER 19 85

 the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**NORRIS E. COX**Age **40**Birthplace **N.C.**
(State)Groom's
Residence**435 ROSECROFT TERRACE.**Marital Status **DIVORCED**Bride's
Name**MARY A. WARFIELD**Age **40**Birthplace **MD.**
(State)Bride's
Residence**435 ROSECROFT TERRACE.**Marital Status **DIVORCED**Relationship to groom if any **NONE****DAINE A. WAGNER**

Name of Officiating Clergy or Authorized Officer

MINISTER- MEMORIAL UNITED METH. CHURCH

Title and Religious Denomination or Office

3340 FREDERICK AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41847

State of Maryland

LICENSE NO.

130288

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GARY J. SPENCER**Age **32** Birthplace **WASH. D.C.**
(State)Groom's Residence **6509 W. FOREST RD. LANDOVER, MD**Marital Status **SINGLE**Bride's Name **ILER RUTH WILSON**Age **24** Birthplace **MD.**
(State)Bride's Residence **6509 W. FOREST RD. LANDOVER, MD**Marital Status **DIVORCED**Relationship to groom if any **NONE****LOUIS G. SMITH**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 28****85****PASTOR- ST. MARK UNITED CHURCH,, INC.**

Title and Religious Denomination or Office

6711 CHISHOLM DR.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 13 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41848

LICENSE NO.
 130181

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DONALD HAMILTON STRONG**

Age **47**

Birthplace **N.Y.**
(State)

Groom's Residence **5659 SHEEROCK CT. COLUMBIA, MD.**

Marital Status **DIVORCED**

Bride's Name **SHEILA ROMAINE BUTLER**

Age **31**

Birthplace **MD.**
(State)

Bride's Residence **5659 SHEEROCK CT. COLUMBIA, MD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

GEORGE ALEXANDER

Name of Officiating Clergy or Authorized Officer

PASTOR- BETHANY BAPTIST CHURCH

Title and Religious Denomination or Office

2616 RIGLEY ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 13 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **OCT 21 85**

JW

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41849

LICENSE NO.

130165

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

SCOTT RIDGELY MARTINET

Age 29

Birthplace MD
(State)

Groom's
Residence

3401 MOUNT CARMEL RD. BALTO.CO,MD

Marital Status SINGLE

Bride's
Name

LORI JEAN WELSH

Age 26 Birthplace MD
(State)

Bride's
Residence

4300 PINEHURST RD.

Marital Status SINGLE

Relationship to groom if any NONE

ALPHONSO G. ROSE

Name of Officiating Clergy or Authorized Officer

PRIEST- CATHOLIC

Title and Religious Denomination or Office

1701 REGENT RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on NOV 13 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41850

Certificate of Marriage

State of Maryland

LICENSE NO.

130120

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EUGENE T CRAWFORD**

Age **23** Birthplace **MD.**
(State)

Groom's Residence **2637 HURON ST**

Marital Status **SINGLE**

Bride's Name **TONYA R ROLLINGS**

Age **23** Birthplace **MD.**
(State)

Bride's Residence **3301 INGLESIDE AVE**

Marital Status **SINGLE**
NONE

Relationship to groom if any

RALPH L. DENNIS

Name of Officiating Clergy or Authorized Officer

PASTOR- BETHEL HOLY TABERNACLE

Title and Religious Denomination or Office

1606 ASHLAND AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

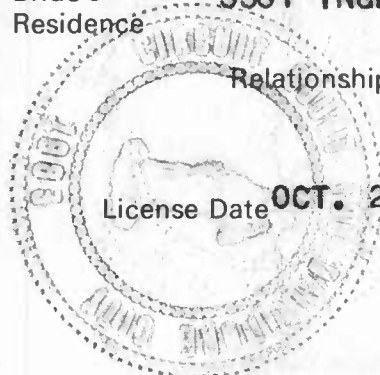
office on

NOV 13 1985

SANDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41851
LICENSE NO.
130108

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

ALONZO COLVIN SR

Age 22

Birthplace MD.
(State)

Groom's
Residence

1306 W LEXINGTON ST

Marital Status

SINGLE

Bride's
Name

KATIE SMITH

Age 23

Birthplace MD.
(State)

Bride's
Residence

1306 W LEXINGTON ST

Marital Status
NONE

SINGLE

Relationship to groom if any

H.E. FEWS

Name of Officiating Clergy or Authorized Officer

PASTOR

Title and Religious Denomination or Office

3412 CARLISLE AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41852

Certificate of Marriage

State of Maryland

LICENSE NO.

130054

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS WAXTER, JR.**Age **51** Birthplace **MD.**
(State)Groom's Residence **4721 EAST LANE**Marital Status **DIVORCED**Bride's Name **NANCY W. FROST**Age **45** Birthplace **ILL.**
(State)Bride's Residence **5 D- HAMILL ROAD**Marital Status **DIVORCED**Relationship to groom if any **NONE**

P. BARRETT RUDD

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 21 85****MINISTER- PRESBYTERIAN CHURCH (USA)**

Title and Religious Denomination or Office

1601 RIDERWOOD DR.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41853

LICENSE NO.
 130001

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN WILLIAM JOHNSON**

Age **43** Birthplace **MD.**
 (State)

Groom's Residence **7216 OAKHAVEN CIRCLE BALTO.CO., MD.**

Marital Status **DIVORCED**

Bride's Name **VILETTA LEWIS MOON**

Age **40** Birthplace **MD.**
 (State)

Bride's Residence **5012 DICKEY HILL ROAD**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

WILLIAM C. CALHOUN, SR.

Name of Officiating Clergy or Authorized Officer

PASTOR- TRINITY BAPTIST CHURCH

Title and Religious Denomination or Office

1601 DRUID HILL AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 13 1985

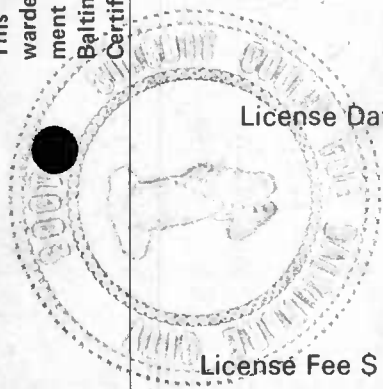
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **OCT 14 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41854

Certificate of Marriage

State of Maryland

LICENSE NO.

130008

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD W. SHIFFLETT**Age **27** Birthplace **VA.**
(State)Groom's Residence **132 N. KENWOOD AVENUE**Marital Status **SINGLE**Bride's Name **TERESA M. DOYLE**Age **23** Birthplace **MD.**
(State)Bride's Residence **106 N. BELNORD AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN DIETZENBACH**

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

2638 E. BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOV 13 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **OCT. 14 85**License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41855

Certificate of Marriage

State of Maryland

LICENSE NO.

130018

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

10:15

Groom's
Name**ROBERT LEE GARRIS**Age 32 Birthplace MD.
(State)Groom's
Residence**4918 GUNTHER AVENUE**Marital Status **SINGLE**Bride's
Name**ROBIN PATRICIA CHRISTMAS**Age 26 Birthplace N.J.
(State)Bride's
Residence**4918 GUNTHER AVENUE**Marital Status **SINGLE**

Relationship to groom if any

NONE**JAMES THOMAS**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 14 85****PASTOR- JEHOVAH'S WITNESS**

Title and Religious Denomination or Office

4013 ELDERON AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

tt

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41856

Certificate of Marriage

State of Maryland

LICENSE NO.

130030

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID BARTLEY BLAINE, JR.** Age **54** Birthplace **VA.**
(State)
Groom's Residence **406 D WOODLAKE CT. A.A. CO., MD.** Marital Status **DIVORCED**
Bride's Name **DAPHNE LEE ENGLAND** Age **35** Birthplace **N.C.**
(State)
Bride's Residence **402 SILVERLEAF CT. A.A. CO., MD.** Marital Status **DIVORCED**
Relationship to groom if any **NONE**

MARK R. BOLING

Name of Officiating Clergy or Authorized Officer

License Date **OCT 18 85** **PASTOR- BROOKLYN UNITED METH. CHURCH**

Title and Religious Denomination or Office

401 PONTIAC AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41857

Certificate of Marriage

State of Maryland

LICENSE NO.

129918

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD C SILBERZAHN JR**Age **25** Birthplace **MD.**
(State)Groom's Residence **2031 GRAYLOCK CT HARFORD CO MD**Marital Status **SINGLE**Bride's Name **CONSTANCE J HARWARD**Age **22** Birthplace **MD.**
(State)Bride's Residence **6 BUTTRICK CT BALTO CO MD**Marital Status **SINGLE**Relationship to groom if any **NONE****WAYNE G. FUNK**

License Date

OCT 17 85

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. MATTHEW'S CATHOLIC CHURCH

Title and Religious Denomination or Office

5401 LOCH RAVEN BLVD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41858

State of Maryland

LICENSE NO.

129864

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

DANA KESLING

Age 34Birthplace OHIO
(State)Groom's
Residence

459 LAMBERT CT BALTO CO MD

Marital Status

DIVORCED

Bride's
Name

MICHELE L BROWN

Age 19Birthplace PA
(State)Bride's
Residence

229 N CHARLES ST

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT 4 85

JW

JERRY NOBLE

Name of Officiating Clergy or Authorized Officer

PASTOR- CHURCH OF GOD

Title and Religious Denomination or Office

2130 SMITH AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41859

LICENSE NO.

129857

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD D. MARINE**

Age **30** Birthplace **MD.**
 (State)

Groom's Residence **RT.4 BOX 149, DORCHESTER CO., MD.**

Marital Status **SINGLE**

Bride's Name **SHIELLA SHAW**

Age **25** Birthplace **MD.**
 (State)

Bride's Residence **7321 MALLORY CT.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

DANIEL C. DORSEY

Name of Officiating Clergy or Authorized Officer

PASTOR - MD. CHURCH OF GOD IN CHRIST, INC.

Title and Religious Denomination or Office

5100 DONMERE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 13 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41860

LICENSE NO.

129793

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CALVIN E. KEENEY, JR.** Age **36** Birthplace **MD.**
(State)
 Groom's Residence **3227 DUDLEY AVE.** Marital Status **DIVORCED**
 Bride's Name **ANGELA M. GENOVESE** Age **36** Birthplace **MD.**
(State)
 Bride's Residence **3912 DUDLEY AVE.** Marital Status **SINGLE**
 Relationship to groom if any **NONE**

License Date **OCT. 8 85**

ROBERT HENRY BROOKMAN

Name of Officiating Clergy or Authorized Officer

ELDER- UNITED METHODIST

Title and Religious Denomination or Office

3403 GOUGH ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

License Fee \$ _____

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

tt

NOV 13 1985

2

85-41861

Certificate of Marriage

State of Maryland

LICENSE NO.

51755

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov 1985the following persons were by me united in marriage at Balti Ma

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BOOKER T. LIVINGSTON, JR.**Age **33** Birthplace **MD.**
(State)Groom's Residence **529 S. WICKHAM RD.**Marital Status **DIVORCED**Bride's Name **LECKTER C. STACY**Age **32** Birthplace **S. CAR.**
(State)Bride's Residence **529 S. WICKHAM RD.**Marital Status **DIVORCED**

Relationship to groom if any

2ND. COUSINLicense Date **NOV. 4,****85**

Name of Officiating Clergyman or Authorized Officer

Minister

Title and Religious Denomination or Office

3512 Powhatan Ave

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85Carl T. Chester

Signature-Clerk of the Court

License Fee - Resident \$
Non-Resident \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

DUPL. #130380

2

Certificate of Marriage

85-41862

State of Maryland

LICENSE NO.
129227

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of Nov 1985the following persons were by me united in marriage at Balto Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

PAUL I LEWIS

Age 33

Birthplace

MD.
(State)Groom's
Residence

2 MONTAIGNE CT BALTO CO MD

Marital Status

SINGLE

Bride's
Name

ROBIN M LEBOWITZ

Age 29

Birthplace

MD.
(State)

Bride's

Residence

2 MONTAIGNE CT BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

SEPT 9

85

JW

Name of Officiating Clergyman or Authorized Officer

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85

License Fee

\$25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41863

State of Maryland

LICENSE NO.

128911

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of Nov 1985the following persons were by me united in marriage at Balti. Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **VOLTAIRE AUTURO HARRIS**Age **32** Birthplace **N. C.**
(State)Groom's Residence **4203 PENHURST AVENUE**Marital Status **SINGLE**Bride's Name **PEGGY ANN JACKSON**Age **32** Birthplace **MD.**
(State)Bride's Residence **140 MIDLAND AVENUE**Marital Status **SINGLE**

Relationship to groom if any

NONELicense Date **OCT. 30** **85**

Name of Officiating Clergyman or Authorized Officer

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41864

State of Maryland

LICENSE NO.

128959

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of Nov. 1985the following persons were by me united in marriage at Baltimore Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

RAY M. WILLIAMS

Age 53 Birthplace OHIO
(State)Groom's
Residence

63 E. RANDALL ST.

Marital Status DIVORCEDBride's
Name

BARBARA J. TEMPLE

Age 43 Birthplace MD.
(State)

Bride's

Residence 63 E. RANDALL ST.

Marital Status DIVORCEDRelationship to groom if any NONELicense Date OCT. 17 85

Name of Officiating Clergyman or Authorized Officer

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41865

Certificate of Marriage

State of Maryland

LICENSE NO.
128059

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 10th day of Nov- 1985the following persons were by me united in marriage at Balti-Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JAMES H STYLES

Age 29 Birthplace MD
(State)Groom's
Residence

217 AUDREY AVE A.A.CO.MD

Marital Status DIVORCEDBride's
Name

VICKI M. FRANTOM

Age 23 Birthplace MD
(State)Bride's
Residence

4702 SCHLEY AVE

Marital Status SINGLE

Relationship to groom if any

NONE

License Date

JULY 18 85

jw

Name of Officiating Clergy or Authorized Officer

Michael Oschuk

Title and Religious Denomination or Office

Minister

Address of Clergy or Authorized Officer

3803 4th Street

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25⁰⁰

This copy to be kept by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41866

Certificate of Marriage

State of Maryland

LICENSE NO.

130296

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 19 85

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **RONALD HERBERT HAYES**Age **42** Birthplace **MD.**
(State)Groom's
Residence **4306 FERNHILL AVENUE**Marital Status **DIVORCED**Bride's
Name **JACQUELINE ELAINE BROWN**Age **37** Birthplace **TX.**
(State)Bride's
Residence **4205 OAKFORD STREET**Marital Status **DIVORCED**

Relationship to groom if any

NONELicense Date **OCT. 31 85**

TT

John R. Bryant
Name of Officiating Clergy or Authorized OfficerMinister
Title and Religious Denomination or Office300 Druid Hill Ave.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41867

LICENSE NO.
130316

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9th day of Nov 1985

the following persons were by me united in marriage at

Balti Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOHN L. ANTONELLI

Age **26**

Birthplace **MD.**
(State)

Groom's
Residence

311 TETRA CT A.A.CO.MD.

Marital Status **SINGLE**

Bride's
Name

DAWN M. MC INNIS

Age **25** Birthplace **MD.**
(State)

Bride's
Residence

311 TETRA CT A.A.CO.MD.

Marital Status **SINGLE**
NONE

Relationship to groom if any

License Date **NOVEMBER 1 85**

TT

Allen Novolny

Name of Officiating Clergy or Authorized Officer

Catholic Priest

Title and Religious Denomination or Office

4501 W. Charles ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11/13-85
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41868

Certificate of Marriage

State of Maryland

LICENSE NO.

130319

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of Nov. 1985

the following persons were by me united in marriage at

Balt. Md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**TIMOTHY P LEAHY**Age **31**Birthplace **WISC**
(State)Groom's
Residence**31 EAST ST A.A.CO.MD.**

Marital Status

SINGLEBride's
Name**EILEEN P GALLAGHER**Age **29**Birthplace **N Y**
(State)Bride's
Residence**2416 FALLING CREEK RD MONT CO MD**Marital Status
NONE**SINGLE**
(State)

Relationship to groom if any

License Date **NOV. 5****85**William Mc Mahon
Name of Officiating Clergy or Authorized OfficerMinister
Title and Religious Denomination or OfficeBalt. Md
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-13-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

64

85-41869

Certificate of Marriage

State of Maryland

LICENSE NO.

129967

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

EDWARD W FISCHER

Age 29

Birthplace

MD.

(State)

Groom's
Residence

7934 MANSION HOUSE CROSSING A.A.CO.MD.

Marital Status

SINGLE

Bride's
Name

DEBRA D ASHENFELTER

Age 29

Birthplace

MD.

(State)

Bride's
Residence

7934 MANSION CROSSING A.A.CO.MD.

Marital Status

DIVORCED

Relationship to groom if any

NONE

REV. MARK R. BOLING

Name of Officiating Clergy or Authorized Officer

License Date OCT. 25

85

BROOKLYN UNITED METH. CH.

Title and Religious Denomination or Office

401 POUHAC AV. BALTO. MD 21225

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

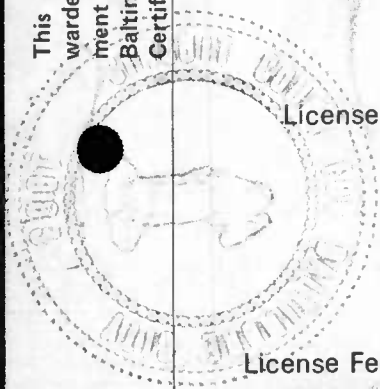
NOV 0 5 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41870

State of Maryland

LICENSE NO.

130013

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|---------------------------------------|----------------|-----------------|------------|------------------------|
| Groom's Name | JOSEPH L BIVONA | Age | 50 | Birthplace | N.Y. (State) |
| Groom's Residence | 1110 HAMPTON GARTH BALTO CO MD | Marital Status | DIVORCED | | |
| Bride's Name | LYNN E TOBACK | Age | 33 | Birthplace | MD. (State) |
| Bride's Residence | 3010 KENYON AVE | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

License Date **OCT. 16,**

JOHN A. LOVEJOY

Name of Officiating Clergy or Authorized Officer

85 UNITED METHODIST CHURCH

Title and Religious Denomination or Office

5710 WHITE AV. BALTIMORE, MD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 0 5 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41871

LICENSE NO.

130031

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JEROME JAMES AIKEN**

Age **25** Birthplace **MD.**
(State)

Groom's Residence **3503 MENLO DRIVE**

Marital Status **SINGLE**

Bride's Name **KAREN REBA WILLIAMS**

Age **27** Birthplace **MD.**
(State)

Bride's Residence **2929 WOODLAND AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JESSE E. YOUNG, JR.

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 16 85**

BAPTIST

Title and Religious Denomination or Office

5710 HIGHGATE DRIVE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOV 5 1985**

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41872

LICENSE NO.

130358

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 5th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **STANLEY A. TOLSON**

Age **42** Birthplace **WASH.D.C.**
(State)

Groom's Residence **2815 WALBROOK AVE.**

Marital Status **SINGLE**

Bride's Name **DARLENE P. FRANCIS**

Age **32** Birthplace **S. CAR.**
(State)

Bride's Residence **3128 BAKER ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

TALBERT GWYNN

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 4 85**

ASS'T. MINISTER- CENTRAL CHURCH OF CHRIST

Title and Religious Denomination or Office

4301 WOODRIDGE RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 7 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 3500

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41873

Certificate of Marriage

State of Maryland

LICENSE NO.

129566

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of November 1985

the following persons were by me united in marriage at

Baltimore, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

KENNETH R SMITH

Age

37

Birthplace

MD.

(State)

Groom's
Residence

1139 E NORTHERN PKWY

Marital Status

DIVORCED

Bride's
Name

ROSLYN Y MILLER

Age

21

Birthplace

MD.

(State)

Bride's
Residence

27 BLEDSOE CIRCLE BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date **SEPT. 23**

85

tt

Name of Officiating Clergy or Authorized Officer

R. Calvin Jordan Jr.
Pastor St Philips Lutheran Church
501 N. Caroline St. Baltimore, MD.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 07 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41874

Certificate of Marriage

State of Maryland

LICENSE NO.

129770

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 3rd day of November 19 85

the following persons were by me united in marriage at

Baltimore, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

GEORGE L. FREYMAN

Age 27

Birthplace

MD.

(State)

Groom's
Residence

308 CHRISTY RD A.A.CO.MD

Marital Status

SINGLE

Bride's
Name

SUSAN E PFEIFER

Age 26

Birthplace

MD.

(State)

Bride's
Residence

1119 COWPENS AVE BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

SEPT. 30 85

tt

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office

NOV 07 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41875

Certificate of Marriage

State of Maryland

LICENSE NO.

130115

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of November 19 85

the following persons were by me united in marriage at

Baltimore md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT LOUIS BAYLOR**Age **47**Birthplace **MD.**
(State)Groom's Residence **705 E. 36th STREET**Marital Status **DIVORCED**Bride's Name **ETHEL NAOMI LOWERY**Age **40**Birthplace **VA.**
(State)Bride's Residence **705 E. 36th STREET**Marital Status **DIVORCED**

Relationship to groom if any

NONELicense Date **OCT 18 85**

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 07 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41876

Certificate of Marriage

State of Maryland

LICENSE NO.

130185

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of November 19 85

the following persons were by me united in marriage at

Baltimore, Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RAYMOND ARNOLD DAVIS**Age **31** Birthplace **MD.**
(State)Groom's Residence **109 E. CROSS ST.**Marital Status **DIVORCED**Bride's Name **KATHY LEE FITZGERALD**Age **27** Birthplace **MD.**
(State)Bride's Residence **109 E. CROSS ST.**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **OCT. 22**

85

Name of Officiating Clergy or Authorized Officer

Rev. C. A. Wroten
Minister Lee Street Memorial Baptist

Title and Religious Denomination or Office

109 Warren Ave. Baltimore, Md.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 07 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41877

Certificate of Marriage

State of Maryland

LICENSE NO.

130266

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of November 19 85

the following persons were by me united in marriage at

Baltimore, Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

KEVIN GERARD SMITH

Age 27

Birthplace

MD.

(State)

Groom's
Residence

1726 E. LAFAYETTE AV.

Marital Status

SINGLE

Bride's
Name

LINDA JACKSON

Age 26

Birthplace

MD.

(State)

Bride's

Residence

1726 E. LAFAYETTE AV.

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date OCT. 28,

85

Name of Officiating Clergy or Authorized Officer

Rev. Dockery S. Thompson

Title and Religious Denomination or Office

Pastor Friendship Baptist Church

Address of Clergy or Authorized Officer

1738 Normal Ave.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 07 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41878

State of Maryland

LICENSE NO.

130298

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 3rd day of November 19 85

the following persons were by me united in marriage at

Baltimore, md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

RONALD G SHEARN

Age **28**

Birthplace **MD.**

Groom's
Residence

1248 YOUNG CT

Marital Status

(State)
SINGLE

Bride's
Name

LULA M ALLEN

Age **31**

Birthplace **MD.**

Bride's
Residence

1248 YOUNG CT

Marital Status

(State)
DIVORCED

Relationship to groom if any

NONE

License Date **OCT 30 85**

JW

Name of Officiating Clergy or Authorized Officer

Pastor Joyce A. Liser

Title and Religious Denomination or Office

Independent Assemblies of God

Address of Clergy or Authorized Officer

6601 Cleveland Ave Balto, md 21222

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 07 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41879

Certificate of Marriage

State of Maryland

LICENSE NO.

130006

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY E. ROSE**Age **35** Birthplace **MD.**
(State)Groom's Residence **1048 BETHUNE RD.**Marital Status **SINGLE**Bride's Name **ELLA M. MC FADDEN**Age **34** Birthplace **S. CAR.**
(State)Bride's Residence **1048 BETHUNE RD.**Marital Status **SINGLE**Relationship to groom if any **NONE****DAVID T. TOMLIN**

Name of Officiating Clergy or Authorized Officer

MINISTER- BAPTIST

Title and Religious Denomination or Office

1009 PROVIDENCE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOV 6 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41880

State of Maryland

LICENSE NO.

129838

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PATRICK MICHAEL MC NEW**

Age **32** Birthplace **MD.**
(State)

Groom's Residence **3233 FLEET STREET**

Marital Status **SINGLE**

Bride's Name **DAWN A. CLASING**

Age **25** Birthplace **MD.**
(State)

Bride's Residence **3233 FLEET STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

DENNIS M. CARDIFF

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

2638 E. BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

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2

Certificate of Marriage

State of Maryland

85-41881

LICENSE NO.

129835

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

CRAIG MITCHELL SHERWOOD

Age 36 Birthplace WASHINGTON
(State)

Groom's Residence

2224 HANSON RD.

Marital Status SINGLE

Bride's Name

PEARL KALLOO COSTANTINE

Age 41 Birthplace TRINIDAD
(State)

Bride's Residence

1648 RAMBLEWOOD ROAD

Marital Status DIVORCED

Relationship to groom if any

NONE

License Date

OCT 18 1985

JW

J. WESLEY POTTER

Name of Officiating Clergy or Authorized Officer

MINISTER

Title and Religious Denomination or Office

5908 LOCH RAVEN BLVD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41882

LICENSE NO.

130394

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

HARRY J WALKER

Age **27**

Birthplace **VA**
(State)

Groom's
Residence

2734 LAURETTA AVE

Marital Status

SINGLE

Bride's
Name

REGINA L COLE

Age **27**

Birthplace **GERMANY**
(State)

Bride's
Residence

700 N DENNISON ST

Marital Status
NONE

SINGLE
(State)

Relationship to groom if any

CHARLOTTE MATTHEWS

Name of Officiating Clergy or Authorized Officer

PASTOR- BETHEL A.M.E. CHURCH

Title and Religious Denomination or Office

1720 FREEDOM WAY

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 4**

85

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD, 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41883

LICENSE NO.

130303

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
 Name **WILLIAM L. DIGGS, JR**

Age **22** Birthplace **MD.**
 (State)

Groom's
 Residence **2737 E. MURA ST.**

Marital Status **SINGLE**

Bride's
 Name **LENORA LYNN SAMPSON**

Age **19** Birthplace **MD.**
 (State)

Bride's
 Residence **7006 N. ALTER ST. BALTO.CO., MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

ASDEAN D. JOHNSON

Name of Officiating Clergy or Authorized Officer

PASTOR

Title and Religious Denomination or Office

1233 N. BOND STREET

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41884

LICENSE NO.

130249

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

LEONARD JOSEPH CIOTTA, JR

Age **28** Birthplace **MD.**
 (State)

Groom's
Residence

6255 PIMLICO RD.

Marital Status **SINGLE**

Bride's
Name

CHRISTINE ELIZABETH OBERG

Age **29** Birthplace **MD.**
 (State)

Bride's
Residence

6255 PIMLICO RD.

Marital Status **SINGLE**

Relationship to groom if any **NONE**

E. M. TAYLOR

Name of Officiating Clergy or Authorized Officer

PRIEST- CATHOLIC

Title and Religious Denomination or Office

1701 REGENT RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 6 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41885

State of Maryland

LICENSE NO.

130198

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

EDWARD D GIBSON

Age 19Birthplace MD.
(State)Groom's
Residence

3402 LEVERTON AVE

Marital Status SINGLEBride's
Name

DEBBIE L MIGHT

Age 19 Birthplace MD.
(State)Bride's
Residence

3402 LEVERTON AVE

Marital Status SINGLE

Relationship to groom if any

NONECHARLES P. MARSHALL

Name of Officiating Clergy or Authorized Officer

PASTOR- EMMANUEL LUTHERAN CHURCH

Title and Religious Denomination or Office

3131 E. BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 6 1985SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

OCT. 2385License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41886

State of Maryland

LICENSE NO.
128328Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)I Hereby Certify that on the 1ST day of Nov. 1985

the following persons were by me united in marriage at

Balti. Md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOE MILLER

Age 23

Birthplace

MD.

(State)

Groom's
Residence

137 NORTHBEND RD.

Marital Status

SINGLE

Bride's
Name

HURLIE K. CRADLE

Age 19

Birthplace

MD.

(State)

Bride's
Residence

137 NORTHBEND RD.

Marital Status

SINGLE

Relationship to groom, if any

NONE

License Date

AUG 1

85

JW

Name of Officiating Clergy or Authorized Officer

Hural Thompson
Minister

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

1303 Ramblewood Rd

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

175-95
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41887

LICENSE NO.

130307

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

KEVIN J. CLANCY

Age

28

Birthplace

MD.

(State)

Groom's
Residence

3 ATHENRY CT. BALTO. CO., MD.

Marital Status

DIVORCED

Bride's
Name

LORRIE E. BRAMBLE

Age

24

Birthplace

MD.

(State)

Bride's
Residence

3 ATHENRY CT. BALTO. CO., MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

HERBERT

License Date

NOV 1

85

Name of Officiating Clergy or Authorized Officer

PASTOR- IMMANUEL LUTHERAN CHURCH

Title and Religious Denomination or Office

LOCH RAVEN & BELEVEDERE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 5 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41888

LICENSE NO.

130287

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD JOSEPH ROBAK**

Age **23** Birthplace **MD.**
(State)

Groom's Residence **6905 EASTBROOK AV.**

Marital Status **SINGLE**

Bride's Name **BETSY MARIE EDWARDS**

Age **23** Birthplace **FLORIDA**
(State)

Bride's Residence **2400 BROAD AV. BALTOCCO., MD**

Marital Status **SINGLE**

Relationship to groom, if any **NONE**

License Date **OCT 29 85**

CHESTER J. MIECZKOWSKI

Name of Officiating Clergy or Authorized Officer

PASTOR- HOLY ROSARY CHURCH

Title and Religious Denomination or Office

408 S. CHESTER ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

NOV 5 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41889

LICENSE NO.

130277

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN PATRICK HADDAWAY**

Age **25** Birthplace **MD.**
(State)

Groom's Residence **1602-A SOUTH CHARLES ST.**

Marital Status **DIVORCED**

Bride's Name **JO ANNA MARTIN**

Age **22** Birthplace **MD.**
(State)

Bride's Residence **1602-A SOUTH CHARLES ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JA, ES B. HUFFMAN

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 28 85**

PASTOR- LUTHERAN CHURCH IN AMERICA

Title and Religious Denomination or Office

214 e. RANDALL ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOV 5 1985**

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41890

Certificate of Marriage

State of Maryland

LICENSE NO.

130263

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**GREGORY VAUGHN RICHARDSON**Age 34 Birthplace MD.
(State)Groom's
Residence**1119 WHITELOCK STREET**Marital Status **SINGLE**Bride's
Name**CHERYL JEANNEAN BAILEY**Age 24 Birthplace MD.
(State)Bride's
Residence**900 BARE BRANCH CT. BALTO. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE****HOWARD BROOKS**

Name of Officiating Clergy or Authorized Officer

ELDER- JEHOVAH'S WITNESS

Title and Religious Denomination or Office

1624 MC CULLOH ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 5 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court:

2

85-41891

Certificate of Marriage

State of Maryland

LICENSE NO.

130226

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

CHARLES W SMITH

Age 71Birthplace N.J.

(State)

Groom's
Residence

5115 BALTIMORE NATIONAL PIKE

Marital Status

DIVORCED

Bride's
Name

VIRGINIA L BROOKS

Age 63Birthplace N CAR

(State)

Bride's
Residence

5115 BALTIMORE NATIONAL PIKE

Marital Status

DIVORCED

Relationship to groom if any

NONE

ANDREW REAVES

Name of Officiating Clergy or Authorized Officer

PASTOR- EVENING STAR BAPT. CHURCH

Title and Religious Denomination or Office

1505 BRADDISH AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

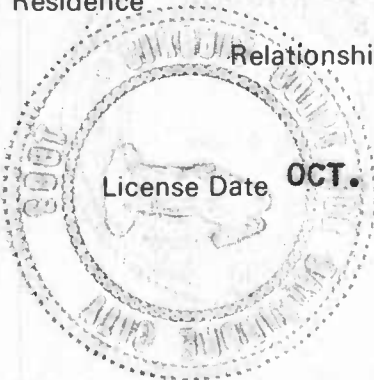
I hereby certify that the above is a true copy of a record filed in this

office on

NOV 5 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

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2

Certificate of Marriage

85-41892

State of Maryland

LICENSE NO.

130223

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN P. EMMERLING, JR.** Age **33** Birthplace **MD.**
(State)
Groom's Residence **16 E. MT. VERNON PLACE** Marital Status **SINGLE**
Bride's Name **LISA C. SARUBIN** Age **28** Birthplace **MD.**
(State)
Bride's Residence **16 E. MT. VERNON PLACE** Marital Status **SINGLE**
Relationship to groom if any **NONE**

ARYEH AZRIEL

Name of Officiating Clergy or Authorized Officer

RABBI- BALTIMORE HEBREW CONGREGATION

Title and Religious Denomination or Office

7401 PARK HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

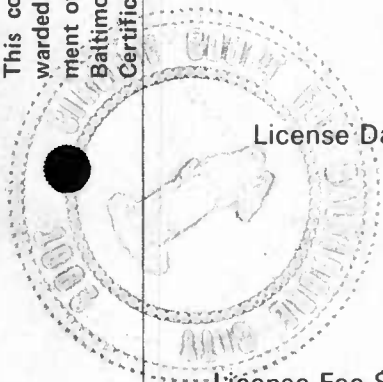
office on

NOV 5 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **OCT. 24** **85**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41893

LICENSE NO.

130219

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MATTHEW W. BRAGG Age 25 Birthplace W. VA.
(State)

Groom's Residence 107 KENILWORTH PARK DR. BALTO.CO., MD. Marital Status DIVORCED

Bride's Name VICKI S. SPIGEL Age 25 Birthplace MD.
(State)

Bride's Residence 107 KENILWORTH PARK DR. BALTO.CO., MD. Marital Status SINGLE

Relationship to groom if any NONE

SIEGFRIED ROWE

Name of Officiating Clergy or Authorized Officer

License Date OCT. 25, 85 9453 PENFIELD CT.

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 5 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41894

State of Maryland

LICENSE NO.

130313

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

MICHAEL G. WESTERFELD

Age **32**

Birthplace

MD.

(State)

Groom's
Residence

429 ORIOLE AVE. BALTO.CO.,MD.

Marital Status

SINGLE

Bride's
Name

MARTHA J. HUNT

Age **27**

Birthplace

S. CAR.

(State)

Bride's
Residence

429 ORIOLE AVE. BALTO.CO.,MD.

Marital Status

SINGLE

Relationship to groom if any **NONE**

ERA S. FERRELL

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1**

85 ASSOC. MINISTER- EMMANUEL C.C. CHURCH

Title and Religious Denomination or Office

1530 W. LEXINGTON ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 5 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41895

State of Maryland

LICENSE NO.

130167

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 1st day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL L. DIETRICH** Age **29** Birthplace **MD.**
(State)
Groom's Residence **305 OVERBROOK RD. BALTO.CO.,MD.** Marital Status **DIVORCED**
Bride's Name **MARY KEARNY RODGERS** Age **27** Birthplace **MD.**
(State)
Bride's Residence **305 OVERBROOK RD. BALTO.CO.,MD.** Marital Status **SINGLE**
Relationship to groom if any **NONE**

DONALD F. ETHERTON

Name of Officiating Clergy or Authorized Officer

RECTOR- CHRIST CHURCH

Title and Religious Denomination or Office

ST. MICHAELS 21663

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on _____

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **OCT. 23, 85**License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41896

LICENSE NO.

130082

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM P. PAWLAK**

Age **25** Birthplace **MD.**
(State)

Groom's Residence **407 S. EAST AVENUE**

Marital Status **SINGLE**

Bride's Name **MARY E. HOLSTEIN**

Age **23** Birthplace **MD.**
(State)

Bride's Residence **7819 FAIRGREEN RD. BALTO. CO. MD** Marital Status **SINGLE**

Relationship to groom if any **NONE**

THOMAS BURKE

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 25, 85**

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

600 S. CONKLING ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41897

LICENSE NO.

130065

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 3rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES L WHELAN**

Age **43**

Birthplace

PA.

(State)

DIVORCED

Groom's Residence **9207 SATYRHILL RD BALTO CO MD**

Marital Status

Bride's Name **TONI A GOODMAN**

Age **31**

Birthplace

MD.

(State)

SINGLE

Bride's Residence **9207 SATYRHILL RD BALTO CO MD**

Marital Status

NONE

Relationship to groom if any

SIEGFRIED ROWE

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 17 85**

CANTOR- JEWISH

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41898

State of Maryland

LICENSE NO.

130046

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

ALAN L BOWMAN

Age 21

Birthplace

MD.

(State)

Groom's
Residence

402 PATLEIGH RD BALTO CO MD

Marital Status

SINGLE

Bride's
Name

KAREN L ZUKOWSKI

Age 20

Birthplace

ILL

(State)

Bride's
Residence

123 WILLOW BEND DR BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

ARTHUR R. KENT

Name of Officiating Clergy or Authorized Officer

PASTOR- UNITED METH. CHURCH

Title and Religious Denomination or Office

541 S. BEECHFIELD AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41899

State of Maryland

LICENSE NO.
129285

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **MORRIS WESLEY GOINES**Age **27** Birthplace **MD.**
(State)Groom's
Residence **2517 HOLLINS STREET**Marital Status **SINGLE**Bride's
Name **DEBORAH MICHELLE SIMMONS**Age **25** Birthplace **PA.**
(State)Bride's
Residence **329 N. CAREY STREET**Marital Status **DIVORCED**Relationship to groom if any **NONE**

REV E. ROSS MATTHEWS

Name of Officiating Clergyman or Authorized Officer

License Date **SEPT 11 85**

UNITED TEMPLE OF GOD, INC

Title and Religious Denomination or Office

827 N. ARLINGTON AV. BALTO. MD. #912

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 0 5 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41900

State of Maryland

LICENSE NO.

129188

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 3rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name STEPHEN V. MAINELLA Age 58 Birthplace MINN. (State)
 Groom's Residence 214 S. CHERRY GROVE AVE., A.A. CO., MD Marital Status DIVORCED
 Bride's Name ELEANOR H. BELL Age 46 Birthplace MD. (State)
 Bride's Residence 5924 CROSS COUNTRY BLVD. Marital Status WIDOW
 Relationship to groom if any NONE

BENJAMIN DINOVIITZ

Name of Officiating Clergyman or Authorized Officer

License Date SEPT. 6 85

RABBI HEBREW ORTHODOX

Title and Religious Denomination or Office

5920 BLAND AVE 21215

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 0 5 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41901

Certificate of Marriage

State of Maryland

LICENSE NO.

129628

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES B. COOK, JR.**Age **24** Birthplace **MD.**
(State)Groom's Residence **325 TAPLOW ROAD**Marital Status **SINGLE**Bride's Name **MELANIE A. PIERCY**Age **23** Birthplace **VA.**
(State)Bride's Residence **1505 PHONEIX RD. BALTO. CO., MD.** Marital Status **SINGLE**Relationship to groom if any **NONE****ALBERT N. HALVERSTART, JR**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 2 85****PRIEST. PR. EPIRCOPAL CHURCH**

Title and Religious Denomination or Office

2216 POT SPRING RD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 0 5 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41902

LICENSE NO.

129727

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|------------------------|----------------|--------|------------|------|
| Groom's Name | ANTHONY G. MOAG | Age | 25 | Birthplace | ILL. |
| | | | | (State) | |
| Groom's Residence | 3625 KIMBLE RD. | Marital Status | SINGLE | | |
| Bride's Name | ELIZABETH K. MACSHERRY | Age | 24 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 509 HAWTHORNE RD. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

License Date OCT. 3,

85

MNGR. PAUL G. COOK

Name of Officiating Clergy or Authorized Officer

R.C. PRIEST

Title and Religious Denomination or Office

101 CHURCH LANE cockeysville md. 21030

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 0 5 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41903

LICENSE NO.

129927

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HENRY DOUGLASS ELDER**

Age **79** Birthplace **VA.**
(State)

Groom's Residence **1612 E. PRESTON STREET**

Marital Status **WIDOWER**

Bride's Name **SARAH DELORES BROWN**

Age **51** Birthplace **MD.**
(State)

Bride's Residence **1225 LINDEN LEAF COURT**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

BISHOP RICHARD W. HARRIS

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 9 85**

NAZARENE TEMPLE APOSTOLIC FAITH CHURCH

Title and Religious Denomination or Office

2312 HARFORD RD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 0 5 1985

License Fee \$ **25.00**

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41904

LICENSE NO.

130234

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26th day of Oct 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN K. FITZPATRICK**Age **23**

Birthplace

N.J.

(State)

Groom's Residence **MONTCLAIR, NEW JERSEY**

Marital Status

SINGLEBride's Name **WENDA L. CUMMINS**Age **23**

Birthplace

MD.

(State)

Bride's Residence **MONTCLAIR, NEW JERSEY**

Marital Status

SINGLE

Relationship to groom if any

NONELicense Date **OCT. 25 85****TT**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be filed by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41905

State of Maryland

LICENSE NO.

130171

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26th day of OCTOBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

ALLAN K FAIRLEY

Age 21

Birthplace

N CAR

(State)

Groom's
Residence

VASS N CAR

Marital Status

SINGLE

Bride's
Name

DORETHEA STEPNEY

Age 19

Birthplace

MD.

(State)

Bride's
Residence

2735 CYLBURN AVE

Marital Status

SINGLE

NONE

Relationship to groom if any

WILLIAM E. HAMILTON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 25**

85

PASTOR- STAR OF BETHLEHEM SPIRITUAL TEMPLE

Title and Religious Denomination or Office

1111 WEST LANVALE STREET

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00NOV 4 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41906

Certificate of Marriage

State of Maryland

LICENSE NO.

129814

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PAUL EDMUND MANZI**Age 25 Birthplace **MASSACHUSETTS**
(State)Groom's Residence **191 LINEBROOK RD,**Marital Status **SINGLE**Bride's Name **LISA LYNN SCHELL**Age 58 Birthplace **KENTUCKY**
(State)Bride's Residence **IPSWICH, MASSACHUSETTS**Marital Status **SINGLE**Relationship to groom if any **NONE****ROBER P. PATTERSON**

Name of Officiating Clergy or Authorized Officer

RECTOR, CHURCH OF THE REDEEMER

Title and Religious Denomination or Office

5603 N. CHAS. ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

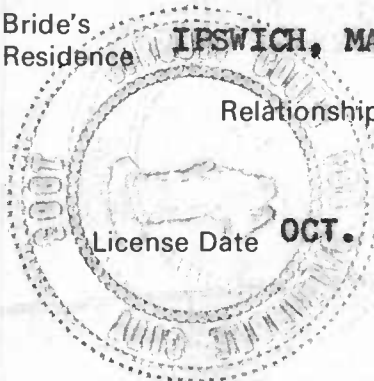
I hereby certify that the above is a true copy of a record filed in this

office on NOV 0 5 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41907

State of Maryland

LICENSE NO.
128658

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85
BALTIMORE, MD.

the following persons were by me united in marriage at _____

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---------------------|----------------|----------|------------|----------------|
| Groom's Name | IRVIN L. ARTER, JR. | Age | 27 | Birthplace | PA. (State) |
| Groom's Residence | HANOVER, PA. | Marital Status | DIVORCED | | |
| Bride's Name | KATHI A. WEAVER | Age | 30 | Birthplace | PA. (State) |
| Bride's Residence | HANOVER, PA. | Marital Status | DIVORCED | | |

Relationship to groom if any NONELicense Date OCT. 25 85

TT

THE REV. DONALD LEE TURLEY
Name of Officiating Clergyman or Authorized Officer
SENIOR PASTOR SECOND ENG. LUTH. CHURCH
Title and Religious Denomination or Office
5010 BRIARCLIFF RD. BALTO., MD 21229
Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 05 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41908

State of Maryland

LICENSE NO.

130262

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 2nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN EDWARD HOCK**

75 Age 28 Birthplace PA.
(State)

Groom's Residence **BLOOMSBURG, PENNSYLVANIA**

Marital Status **SINGLE**

Bride's Name **JOANNE NICOLE MANGIONE**

25 Age 26 Birthplace MD.
(State)

Bride's Residence **2514 PROCTOR LA. BALTO. CO., MD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

CHARLES O. ROUSE

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 25 85**

ASSOC. PASTOR- ROMAN CATHOLIC PRIEST

Title and Religious Denomination or Office

9499 OLD HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 5 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41909

State of Maryland

LICENSE NO.

129608

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 2nd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **MICHAEL FIOCCO**Age **25** Birthplace **MISSOURI**
(State)Groom's
Residence **ALEXANDRIA, VIRGINIA**Marital Status **SINGLE**Bride's
Name **FAITH ANN FINAMORE**Age **25** Birthplace **WASH., D.C.**
(State)Bride's
Residence **15121 RED CLOVER DRIVE MONT.CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN J. NICOLA**

License Date

OCT 22**85**Name of Officiating Clergy or Authorized Officer
PRIEST- CATHOLICTitle and Religious Denomination or Office
GEORGETOWN PREP.-ROCKVILLE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41910

State of Maryland

LICENSE NO.

130147

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **THOMAS DAWKINS, JR**Age **34**

Birthplace

MD.
(State)

Groom's

Residence **1901 E. 31ST ST.**Marital Status **DIVORCED**

Bride's

Name **JOYCE VALJEAN WYNN**Age **33**

Birthplace

VA.
(State)

Bride's

Residence **5521 COLORADO AV. WASHINGTON, D.C.**Marital Status **SINGLE**

Relationship to groom if any

NONE**REV. WALTER E. PAIGE**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 24****85****FAITH BAPTIST CHURCH**

Title and Religious Denomination or Office

833 BOND ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41911

Certificate of Marriage

State of Maryland

LICENSE NO.
130426

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 6th day of Nov. 19 85

the following persons were by me united in marriage at

Baltimore Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RANDOLPH LEE FROHNAPFEL**Age **20** Birthplace **W. VA.**
(State)Groom's Residence **FOLLANSBEE, WEST VIRGINIA**Marital Status **SINGLE**Bride's Name **PENNY JO MYERS**Age **18** Birthplace **OHIO**
(State)Bride's Residence **WELLSBURG, WEST VIRGINIA**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 6****85**Charles F. Dorod
Name of Officiating Clergy or Authorized OfficerBaptist Minister
Title and Religious Denomination or Office223 S. Pulaski ST
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
office on 11-13-85**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41912

Certificate of Marriage

State of Maryland

LICENSE NO.
130513

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 17th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name WALTER EARL SALISBURY Age 31 Birthplace N. CAR.
(State)
Groom's Residence 32 COUNTRY CLUB DR., GREENVILLE, N. CAR. Marital Status SINGLE
Bride's Name SHEILA RENEE BRICKUS Age 23 Birthplace MD.
(State)
Bride's Residence 700 N. GRANTLEY ST. Marital Status SINGLE
Relationship to groom if any NONE

IRA THOMAS CUTLER

Name of Officiating Clergy or Authorized Officer

PASTOR- AFRICAN METH. EPISCOPAL CHURCH

Title and Religious Denomination or Office

808 WHITMORE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

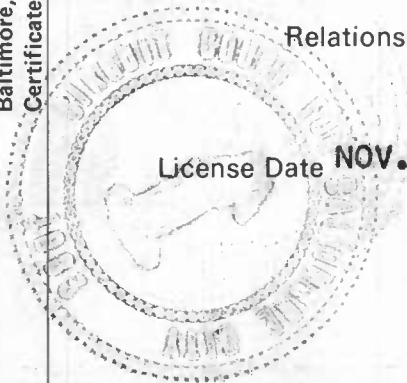
office on

NOV 20 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41913

Certificate of Marriage

State of Maryland

LICENSE NO.

130517

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 17th day of Nov. 1985

the following persons were by me united in marriage at

Balti Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

PAUL SEIDEN

Age 36 Birthplace NEW YORK
(State)Groom's
Residence

TAMPA, FLORIDA

Marital Status DIVORCEDBride's
Name

PATRICIA JEAN HASLBECK

Age 27 Birthplace MARYLAND
(State)

Bride's

Residence

TAMPA, FLORIDA

Marital Status SINGLE

Relationship to groom if any

NONE

License Date NOV. 14 85

Name of Officiating Clergy or Authorized Officer

9453 Penfield CT.

Title and Religious Denomination or Office

Columbia Md

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office of

SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41914

Certificate of Marriage

State of Maryland

LICENSE NO.

130407

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 9 day of Nov. 19 85

the following persons were by me united in marriage at

Baltimore, Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

STEPHEN MARTIN ODENHEIMER

Age 28

Birthplace

CALIFORNIA

(State)

Groom's
Residence

SAN FRANCISCO, CALIFORNIA

Marital Status

SINGLE

Bride's
Name

CORINNE MICHELE SMITH

Age

26

Birthplace

MARYLAND

(State)

Bride's

Residence

SAN FRANCISCO, CALIFORNIA

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

NOV. 6

85

Name of Officiating Clergy or Authorized Officer

John R. Sabatelli

Title and Religious Denomination or Office

Charles F. Wells Streets

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41915

LICENSE NO.

130060

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM DAVID STANLEY**

Age **29** Birthplace **MD.**
(State)

Groom's Residence **BEN SALEM, PENNSYLVANIA**

Marital Status **SINGLE**

Bride's Name **BONNIE LYNN TAYLOR**

Age **30** Birthplace **MD.**
(State)

Bride's Residence **4801 GILRAY DRIVE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

R. CALVIN JORDAN, JR.

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. PHILIP'S LUTHERAN CHURCH

Title and Religious Denomination or Office

501 N. CAROLINE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41916

State of Maryland

LICENSE NO.
128614Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)I Hereby Certify that on the 24th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JEFFERY R KOCH

Age 27Birthplace GA
(State)Groom's
Residence

HOUSTON TEXAS

Marital Status SINGLEBride's
Name

SUSAN C. FUDMAN

Age 27Birthplace MD.
(State)Bride's
Residence

HOUSTON TEXAS

Marital Status
NONE

Relationship to groom if any

MARK G. LOEB

Name of Officiating Clergyman or Authorized Officer

RABBI- BETH ELLONE

Title and Religious Denomination or Office

8101 PARK HEIGHTS 21208

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and for-
warded to the Division of Vital Records, State Depart-
ment of Health and Mental Hygiene, 201 W. Preston
Street, Baltimore, Md. 21201, upon receipt of page 3,
copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41917

State of Maryland

LICENSE NO.

129960

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 23rd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

STEPHEN F. CLARY

Age 27

Birthplace MD.

Groom's Residence

ALEXANDRIA, VIRGINIA

Marital Status

(State) SINGLE

Bride's Name

BARBARA A. BAGLIANI

Age 23

Birthplace MD.

Bride's Residence

1306 RED FOX CT. BALTO.CO.,MD.

Marital Status

(State) SINGLE

Relationship to groom if any

NONE

License Date NOV. 18,

85

JEROME F. TOOLEY

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

1526 COTTAGE LANE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41918

LICENSE NO.
130333

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 5TH. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CURTIS WHEELER**

Age **24** Birthplace **S. CAR.**
(State)

Groom's Residence **4706 GREENSPRING AVE.**

Marital Status **SINGLE**

Bride's Name **KAREN L. SMITH**

Age **20** Birthplace **MD.**
(State)

Bride's Residence **4 N. ASHBURTON ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1. 85**

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

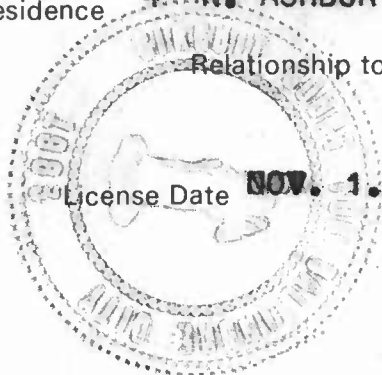
NOV 5 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41919

State of Maryland

LICENSE NO.

129018

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 5TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name LEO C. HARRINGTON

Age 43 Birthplace WASH.D.C.
(State)

Groom's Residence 1325 LEMMON ST.

Marital Status DIVORCED

Bride's Name OKEMA M. WINSTON

Age 28 Birthplace MD.
(State)

Bride's Residence 1325 LEMMON ST.

Marital Status SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergyman or Authorized Officer

License Date OCT 7 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

JW

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 5 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41920

Certificate of Marriage

State of Maryland

LICENSE NO.

130386

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 5TH. day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD,
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **MORRIS FRANKLIN GIBSON**Age **39** Birthplace **PA.**
(State)Groom's
Residence **1415 ARGYLE AVENUE**Marital Status **DIVORCED**Bride's
Name **RACHAEL ANN HEARD**Age **17** Birthplace **MD.**
(State)Bride's
Residence **1415 ARGYLE AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

85 DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 5 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41921

Certificate of Marriage

State of Maryland

LICENSE NO.

130244

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 5TH. day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **WILLIAM ELICERIO**Age **39** Birthplace **MD.**
(State)

Groom's

Residence **2834 WINCHESTER STREET**Marital Status **DIVORCED**

Bride's

Name **DEBORAH DENISE LEE**Age **32** Birthplace **MD.**
(State)

Bride's

Residence **2 WYNMOOR COURT BALTO. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 5 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41922

LICENSE NO.

130421

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 6th day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **VINCENT J. ZAK**

Age **22** Birthplace **CONN.**
(State)

Groom's Residence **4217 POTTER STREET**

Marital Status **SINGLE**

Bride's Name **SUZANNE C. O'NEILL**

Age **21** Birthplace **FRANCE**
(State)

Bride's Residence **4217 POTTER STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 6**

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 7 1985 NOV 7 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41923

LICENSE NO.

130322

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 6TH. day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MELVIN M. STANLEY Age 31 Birthplace GA.
 (State)
 Groom's Residence 2641 KIRK AVE. Marital Status SINGLE
 Bride's Name CAROLYN J. BAGLEY Age 37 Birthplace N. CAR.
 (State)
 Bride's Residence 2641 KIRK AVE. Marital Status DIVORCED
 Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41924

LICENSE NO.

130408

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 7TH. day of NOVEMBER 1985

BALTIMORE, MD.

the following persons were by me united in marriage at _____
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL P. SPEIGHT**

Age **28** Birthplace **MD.**
(State)

Groom's Residence **1208 E. EAGER STREET**

Marital Status **SINGLE**

Bride's Name **PATRICIA MAE WILSON**

Age **34** Birthplace **MD.**
(State)

Bride's Residence **1208 E. EAGER STREET**

Marital Status **DIVORCED**

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 7 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 7,**

85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41925

LICENSE NO.

130384

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 7TH.9 day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PHILLIP SCOTT RICHIE**

Age **20** Birthplace **KENTUCKY**
(State)

Groom's Residence **221 E. 33rd STREET**

Marital Status **SINGLE**

Bride's Name **DAWN LORENE LEWIS**

Age **16** Birthplace **MARYLAND**
(State)

Bride's Residence **221 E. 33rd STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 7,** **85**

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 7 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41926

State of Maryland

LICENSE NO.

130436

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 7TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES FAIRFAX SUMMERVILLE**Age **28** Birthplace **MD.**
(State)Groom's Residence **1712 WESTWOOD AVENUE**Marital Status **SINGLE**Bride's Name **LAURA ROCHELLE AVERY**Age **26** Birthplace **MD.**
(State)Bride's Residence **1820 N. FULTON AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 7 85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**NOV 7 1985**
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41927

State of Maryland

LICENSE NO.

130363

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 4th day of Nov- 9 19 85

the following persons were by me united in marriage at

Balti Md
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name EARL DONALD WALLACEAge 25Birthplace JAMAICA
(State)Groom's Residence 5002 RAINTREE WAYMarital Status SINGLEBride's Name LOVETTE JUANITTA WRANAge 21Birthplace MARYLAND
(State)Bride's Residence 5002 RAINTREE WAYMarital Status SINGLE

Relationship to groom if any

NONELicense Date NOV 4 85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK
Signature, Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41928

State of Maryland

LICENSE NO.

130367

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4TH. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **BOBBIE L. WILLIAMS**Age **52**Birthplace **VA.**

(State)

Groom's

Residence **2318 OSWEGO AVE.**Marital Status **DIVORCED**

Bride's

Name **VIRGINIA M. FIELDS**Age **48**Birthplace **S.C.**

(State)

Bride's

Residence **2318 OSWEGO AVE.**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 4,****85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

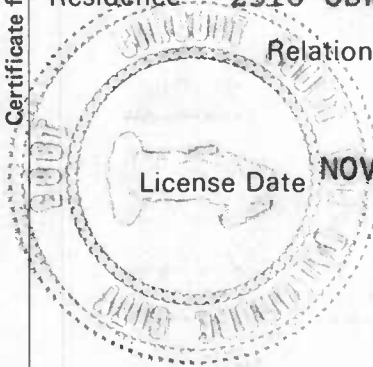
I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41929

State of Maryland

LICENSE NO.
128850

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4th day of Nov 9 1985

the following persons were by me united in marriage at

Balti Md

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **ROSSI GRANT SIMMS**Age **19** Birthplace **MD.**
(State)Groom's
Residence **2406 HOLLINS FERRY ROAD**Marital Status **SINGLE**Bride's
Name **ZINA CRYSTAL STENNETT**Age **17** Birthplace **MD.**
(State)Bride's
Residence **2632 MATTHEWS STREET**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **AUG. 21**

85

Name of Officiating Clergyman or Authorized Officer

Deputy Clerk Carolee C...
Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-4-85

SAUNDRA E. BANKS, CLERK

License Fee \$25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

tt

2

Certificate of Marriage

85-41930

State of Maryland

LICENSE NO.

128701

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4TH. day of NOVEMBER 9 1985the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT JOSEPH STEVENS, JR.**Age **33** Birthplace **GERMANY**
(State)Groom's Residence **4703 ROLAND AVENUE**Marital Status **SINGLE**Bride's Name **GAYLE ZOLA HERSKOVITZ**Age **36** Birthplace **MARYLAND**
(State)Bride's Residence **4703 ROLAND AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**JOAN C. ANDERSON

Name of Officiating Clergyman or Authorized Officer

License Date **SEPT. 23****85**DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

tt

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41931

LICENSE NO.

129983

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4TH. day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LOUIS A. WADE**

Age **30** Birthplace **MD.**
(State)

Groom's Residence **2205 E. COLD SPRING LA.**

Marital Status **SINGLE**

Bride's Name **LACHELLE Y. SCOTT**

Age **24** Birthplace **MD.**
(State)

Bride's Residence **541 E. COLD SPRING LA.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 10 85**

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on:

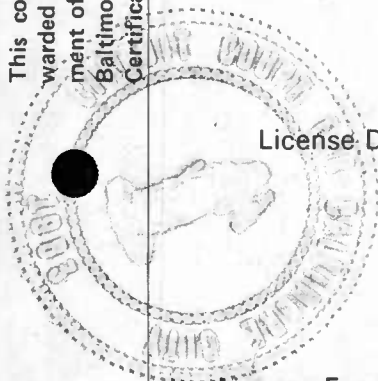
NOV 4 1985

SANDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41932

LICENSE NO.

130397

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4TH day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID LEE SHORT**

Age **35** Birthplace **MD.**
(State)

Groom's Residence **8 8th ST. WORCHESTER CO., MD.**

Marital Status **DIVORCED**

Bride's Name **DELORES MUNCH BROADMAN**

Age **29** Birthplace **MD.**
(State)

Bride's Residence **8 8th ST. WORCHESTER CO., MD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV 4 85**

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985

License Fee \$ 55.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41933

Certificate of Marriage

State of Maryland

LICENSE NO.
130357Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)I Hereby Certify that on the 4TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name NICHOLAS R. SIGISMONDIAge 31Birthplace MD.
(State)Groom's Residence 124 CALLENDER ST.Marital Status DIVORCEDBride's Name HILARY BERNADETTE DAVISAge 23Birthplace MD.
(State)Bride's Residence 124 CALLENDER STMarital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 4,85 DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 4 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41934

Certificate of Marriage

State of Maryland

LICENSE NO.

130415

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 13TH. day of NOVEMBER 9 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

DAVID EDWIN LUCAS

Age 22

Birthplace

MD.

(State)

Groom's
Residence

421 S. WASHINGTON STREET

Marital Status

SINGLE

Bride's
Name

DANA MARIE CHAVIS

Age 19

Birthplace

N.C.

(State)

Bride's

Residence

2019 EASTERN AVENUE

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date NOV. 13,

85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41935

State of Maryland

LICENSE NO.

129949

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 13TH. day of NOVEMBER 9 1985the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ADDISAMAD A. GEYRE** Age **28** Birthplace **SOMALI E.A.**
(State)
Groom's Residence **5044 SILVERHILL CT. APT. 203 P.G.CO., MD.** Marital Status **SINGLE**
Bride's Name **VERNITA A. FAULKNER** Age **26** Birthplace **WASH.D.C.**
(State)
Bride's Residence **5044 SILVERHILL CT. P.G. CO., MD.** Marital Status **SINGLE**
Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 9****85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41936

 LICENSE NO.
130078

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
 I Hereby Certify that on the 13TH. day of NOVEMBER 9 19 85

 the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**GILBERT L. FLOWERS**
 Age **51** Birthplace **VA.**
(State)
Groom's
Residence**2061 ROCKROSE AVENUE**Marital Status **DIVORCED**Bride's
Name**NORMA J. MAHAFFEY**
 Age **63** Birthplace **VA.**
(State)
Bride's
Residence**2061 ROCKROSE AVENUE**Marital Status **WIDOW**

Relationship to groom if any

NONE**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

 License Date **NOV 5 85**
JW
DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

NOV 13 1985

office of

SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41937

Certificate of Marriage

State of Maryland

LICENSE NO.

130478

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 13th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **KENNETH GARY WHITE**Age **21** Birthplace **MD.**
(State)Groom's
Residence **5304 PEERLESS AV.**Marital Status **SINGLE**Bride's
Name **LUCY JEAN CAMPBELL**Age **21** Birthplace **N.C.**
(State)Bride's
Residence **5304 PEERLESS AV.**Marital Status **SINGLE**

Relationship to groom if any

NONE

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 13****85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 13 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41938

State of Maryland

LICENSE NO.

130505

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 12TH day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

ALAN RICHARD REESE

Age

37

Birthplace

PA.

(State)

Groom's

Residence

4308 ROLAND SPRINGS DRIVE

Marital Status

SINGLE

Bride's

Name

VERONICA SALLES

Age

35

Birthplace

S. AMERICA

(State)

Bride's

Residence

4308 ROLAND SPRINGS DRIVE

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOAN

C.

ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date

NOV. 12 85

DEP. CLK.-CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41939

LICENSE NO.
 130151

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 12th day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES CLINTON WARD** Age **22** Birthplace **MD.**
(State)
 Groom's Residence **4747 BELNORD GREEN BALTO. CO., MD.** Marital Status **SINGLE**
 Bride's Name **VICKI SUE BAILEY** Age **23** Birthplace **MD.**
(State)
 Bride's Residence **4747 BELNORD GREEN BALTO. CO., MD.** Marital Status **SINGLE**
 Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 12 85** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41940

LICENSE NO.

130437

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 12th day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name KENNETH EMMETT PUTMAN

Age 21 Birthplace MD.
(State)

Groom's Residence 2638 MILES AVENUE

Marital Status SINGLE

Bride's Name JODIE LITOFKY

Age 21 Birthplace MD.
(State)

Bride's Residence 2638 MILES AVENUE

Marital Status SINGLE

Relationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date NOV. 12 85 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 12 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

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2

Certificate of Marriage

85-41941

State of Maryland

LICENSE NO.

130506

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 12TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KWAME KUNTA HWESI**Age **68** Birthplace **MD.**
(State)Groom's Residence **833 MC ALEER CT.**Marital Status **SINGLE**Bride's Name **SHIELA L. SESSIONS**Age **33** Birthplace **MD.**
(State)Bride's Residence **833 MC ALEER CT.**Marital Status **SINGLE**Relationship to groom if any **NONE**JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 12 85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41942

LICENSE NO.

130425

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 8TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HORATIO B. WILLIAMS, JR.** Age **30** Birthplace **MD.**

Groom's Residence **3910 NOYES CIR. BALTO.CO., MD.** Marital Status **DIVORCED**

(State)

Bride's Name **LINDA J. MIDDLEBROOK** Age **29** Birthplace **MD.**

Bride's Residence **5004 LITCHFIELD AVE.** Marital Status **DIVORCED**

(State)

Relationship to groom if any **NONE**

Charles W. Mackey
Name of Officiating Clergy or Authorized Officer

License Date **NOV. 7**

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOV 12 1985**

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41943

 LICENSE NO.
130344

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
I Hereby Certify that on the 8TH day of NOVEMBER 9 1985

 the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|-------------------------------|----------------|---------------|------------------------|------------|
| Groom's Name | KENNETH E. MILLER | Age | 25 | Birthplace | MD. |
| | | | | <small>(State)</small> | |
| Groom's Residence | 3217 VICKERS RD. | Marital Status | SINGLE | | |
| Bride's Name | ROSALIND K. WASHINGTON | Age | 24 | Birthplace | MD. |
| | | | | <small>(State)</small> | |
| Bride's Residence | 2520 LINDEN AVE. | Marital Status | SINGLE | | |

Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

License Date **NOV. 4 85**

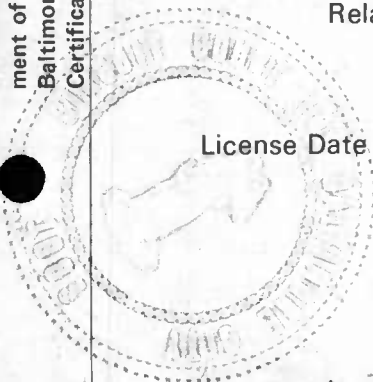
TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

 I hereby certify that the above is a true copy of a record filed in this
 office on **NOV 8 1985**
License Fee \$ 25.00
SAUNDRA E. BANKS, CLERK
 Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41944

Certificate of Marriage

State of Maryland

LICENSE NO.

130409

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PHILLIP DAVIS**Age **28** Birthplace **MD.**Groom's Residence **3918 W. GARRISON AVE.**Marital Status **SINGLE**Bride's Name **BERNADETTE T. GARDNER**Age **24** Birthplace **MD.**Bride's Residence **617 LENNON ST.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

License Date **NOV. 8 85**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41945

LICENSE NO.

130451

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 8th day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **WILLIAM AMOS BRACCHER**

Age **46** Birthplace **MD.**
(State)

Groom's
Residence **3636 KESWICK RD.**

Marital Status **DIVORCED**

Bride's
Name **WILHEMINA C. PICON**

Age **32** Birthplace **MD.**
(State)

Bride's
Residence **3636 KESWICK RD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 8 85**

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41946

LICENSE NO.

130423

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 8TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

RHOAN G. CURRIE

Age 20

Birthplace JAMAICA
(State)

Groom's Residence

9060 TOWN & COUNTRY BLVD.

Marital Status SINGLE

Bride's Name

LORIS G. BARRETT

Age 21

Birthplace JAMAICA
(State)

Bride's Residence

5038 QUEENSBERRY AVENUE

Marital Status SINGLE

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 7 85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of record filed in this

office on

SAUNDRA E. BANKS, CLERK

NOV 8 1985

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41947

LICENSE NO.

129697

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 8th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

NORMAN EDWARD BLACKSTON, JR

Age 24Birthplace MD.
(State)

Groom's
Residence

8 WALDEN WILLOW CT. BALTO.CO.,MD.

Marital Status SINGLE

Bride's
Name

DEBRA CAROL OPPER

Age 24 Birthplace MD.
(State)

Bride's

Residence

8 WALDEN WILLOW CT. BALTO.CO.,MD

Marital Status DIVORCEDRelationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 8 85DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41948

State of Maryland

LICENSE NO.

130193

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**JAMES E ELEY**Age **29**

Birthplace

MD

(State)

Groom's
Residence**2604 MOLTON WAY BALTO CO MD**

Marital Status

SINGLEBride's
Name**BARBARA J BANKS**Age **34**

Birthplace

N CAR

(State)

Bride's
Residence**2604 MOLTON WAY BALTO CO MD**

Marital Status

DIVORCED

Relationship to groom if any

NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 7****85**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41949

LICENSE NO.

130401

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 8TH. day of NOVEMBER 19 85

BALTIMORE, MD.

the following persons were by me united in marriage at _____
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|------------------------------|----------------|--------------------------|------------|------------|
| Groom's Name | GREGORY B. LYMAN | Age | 30 | Birthplace | MD. |
| Groom's Residence | 1248 WASHINGTON BLVD. | Marital Status | SINGLE (State) | | |
| Bride's Name | SHARRON L. MC CALLUM | Age | 24 | Birthplace | MD. |
| Bride's Residence | 1248 WASHINGTON BLVD. | Marital Status | SINGLE (State) | | |
| Relationship to groom if any | NONE | | | | |

License Date **NOV. 4 85**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41950

LICENSE NO.

130491

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 12TH day of NOVEMBER 9 19 85

BALTIMORE CITY

the following persons were by me united in marriage at

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOE C. WELLS, JR.

Age 35

Birthplace

N.C.

(State)

Groom's
Residence

3411 OLD NORTH POINT RD. BALTO. CO., MD.

Marital Status

SINGLE

Bride's
Name

TERRI L. ERHARDT

Age 18

Birthplace

MD.

(State)

Bride's
Residence

1813 MAXWELL AVE. BALTO. CO., MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 12

85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41951

Certificate of Marriage

State of Maryland

LICENSE NO.

130489

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 12TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RICHARD L. SAVINAAge 33 Birthplace MD.
(State)Groom's Residence ROUTE 175 BOX 713 HOWARD CO., MD. Marital Status DIVORCEDBride's Name LINDA M. HIMES Age 16 Birthplace MD.
(State)Bride's Residence ROUTE 175 BOX 813 HOWARD CO., MD. Marital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 12 85DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 55.00NOV 12 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41952

Certificate of Marriage

State of Maryland

LICENSE NO.

130446

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 12TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name EUGENE O'NEIL GARNER Age 28 Birthplace MD.
(State)

Groom's Residence 115 BALNEW AVE. BALTO. CO., MD. Marital Status SINGLE

Bride's Name SHERRI LORRAINE TATE Age 26 Birthplace MD.
(State)

Bride's Residence 115 BALNEW AVE. BALTO. CO., MD. Marital Status SINGLE

Relationship to groom if any NONE

License Date NOV. 12 85JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 12 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41953

Certificate of Marriage

State of Maryland

LICENSE NO.

130334

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**JAMILE RIZO**Age **30** Birthplace **TRINIDAD**
(State)Groom's
Residence**2327 MADISON ST**Marital Status **SINGLE**Bride's
Name**STEPHANIE A DAVID**Age **36** Birthplace **TRINIDAD**
(State)Bride's
Residence**2207 WESTWOOD AVE**Marital Status **DIVORCED**

Relationship to groom if any

NONE**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 8 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41954

Certificate of Marriage

State of Maryland

LICENSE NO.

130433

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS EDWARD KRONTZ**Age **43** Birthplace **W. VIRGINIA**
(State)Groom's Residence **5500 BALLMAN AVE. A.A. CO., MD.**Marital Status **SINGLE**Bride's Name **VICKIE LYNN SHAWKEY**Age **25** Birthplace **MARYLAND**
(State)Bride's Residence **5500 BALLMAN AVE. A.A. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 8****85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41955

LICENSE NO.
 130359

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 8TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|------------------------------|----------------|---------------|------------|------------|
| Groom's Name | LINWOOD PERKINS, JR. | Age | 31 | Birthplace | MD. |
| Groom's Residence | 1803 EDMONDSON AVE. | Marital Status | SINGLE | | |
| Bride's Name | DIANE CURTIS | Age | 29 | Birthplace | MD. |
| Bride's Residence | 3308 FOREST PARK AVE. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 8 85** **DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41956

LICENSE NO.

130430

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 19TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|-------------------------------|----------------|---------------|------------|----------------------------|
| Groom's Name | GARFIELD DELANO BROWN | Age | 28 | Birthplace | JAMAICA (State) |
| Groom's Residence | 5012 WINDSOR MILL ROAD | Marital Status | SINGLE | | |
| Bride's Name | BRENDA SANDERS | Age | 36 | Birthplace | MARYLAND (State) |
| Bride's Residence | 5012 WINDSOR MILL ROAD | Marital Status | SINGLE | | |
| Relationship to groom if any | | NONE | | | |

BARBARA JEAN PITT

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 19 85**

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK
NOV 19 1985

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41957

LICENSE NO.

130501

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 19 day of NOV 9 1985

BALTO MD

the following persons were by me united in marriage at _____

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **RAYMOND V. GUTKOSKA, JR**Age **32**

Birthplace

MD.

(State)

Groom's

Residence **5409 HIGHRIDGE ST. BALTO.CO.,MD**Marital Status **DIVORCED**

Bride's

Name **SHARON L. GREENSTREET**Age **44**

Birthplace

MD.

(State)

Bride's

Residence **5409 HIGHRIDGE ST. BALTO.CO.,MD**Marital Status **DIVORCED**

Relationship to groom if any

NONE**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date

NOV 19 85

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record of this

office on

SHARON L. BARKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41958

Certificate of Marriage

State of Maryland

LICENSE NO.

130424

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 19TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JEROME P COOPER

Age 56 Birthplace MD.
(State)Groom's
Residence

2437 REISTERSTOWN RD

Marital Status DIVORCEDBride's
Name

TISCHIE L BRISBON

Age 37 Birthplace MD.
(State)Bride's
Residence

2437 REISTERSTOWN RD

Marital Status NONE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 12 85

DEPUTY CLERK - CRICUIT COURT

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 19 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41959

Certificate of Marriage

State of Maryland

LICENSE NO.

130593

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 18th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|--------------------------------|----------------|-----------------|------------|-------------|
| Groom's Name | WILLIAM F. KESSLER, JR. | Age | 33 | Birthplace | FLA. |
| | | | | | (State) |
| Groom's Residence | 235 S. DUNCAN ST. | Marital Status | SINGLE | | |
| Bride's Name | ROSALEA C. AMMENHAUSER | Age | 47 | Birthplace | MD. |
| | | | | | (State) |
| Bride's Residence | 235 S. DUNCAN ST. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 18 85** **DEP. CLK. - CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 18 1985License Fee \$ 25.00**SAUNDRA E. DANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41960

Certificate of Marriage

State of Maryland

LICENSE NO.

130486

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 18TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|------------------------------|----------------|---------------|------------|------------|
| Groom's Name | LOUIS A. FLEET | Age | 37 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 2228 E. JEFFERSON ST. | Marital Status | SINGLE | | |
| Bride's Name | SHARON A. CARSON | Age | 27 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 2228 E. JEFFERSON ST. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

License Date **NOV 13 85****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41961

State of Maryland

LICENSE NO.

130395

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 15th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOHN B STEELE JR

Age 39Birthplace MD.

(State)

Groom's
Residence

427 DUMBARTON RD BALTO CO MD

Marital Status

DIVORCEDBride's
Name

DEBORAH A CRISE

Age 30Birthplace MD.

(State)

Bride's
Residence

427 DUMBARTON RD BALTO CO MD

Marital Status
NONE**DIVORCED**

Relationship to groom if any

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 8 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41962

LICENSE NO.

130528

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **PIETRO A. MESSINA**

Age **30** Birthplace **ITALY**
(State)

Groom's
Residence **511 SAVAGE ST.**

Marital Status **DIVORCED**

Bride's
Name **CYNTHIA DERDA**

Age **26** Birthplace **MD.**
(State)

Bride's
Residence **511 SAVAGE ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOVE. 15, 85**

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41963

LICENSE NO.

130541

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 14 day of NOV 9 1985

BALTO MD

the following persons were by me united in marriage at _____
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

TERRY M. DUNLAP

Age

25

Birthplace

MD.

Groom's
Residence

2722 GILES RD.

Marital Status

(State)

SINGLE

Bride's
Name

NATALIE A. ARMSTRONG

Age

23

Birthplace

MD.

Bride's
Residence

2722 GILES RD.

Marital Status

(State)

SINGLE

Relationship to groom if any

NONE

John F. Williams
 Name of Officiating Clergy or Authorized Officer

License Date

NOV 14 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-14-85

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41964

State of Maryland

LICENSE NO.

130540

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14TH day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LARRY WAYNE HOPKINS**

Age **30** Birthplace **N.C.**
(State)

Groom's Residence **4223 THAYER COURT.**

Marital Status **SINGLE**

Bride's Name **SANDRA LEE MCKINNEY**

Age **21** Birthplace **MD.**
(State)

Bride's Residence **20 POSTOFFICE AV. LAUREL, MD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 14 85**

DEP. CLK.-CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41965

LICENSE NO.

130524

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HENRY A. HENSLER, JR.** Age **36** Birthplace **MD.**
 (State)
 Groom's Residence **821 S. FAGLEY ST.** Marital Status **DIVORCED**
 Bride's Name **PATRICIA P. OWENS** Age **41** Birthplace **MD.**
 (State)
 Bride's Residence **527 STEWART AVE. A.A. CO., MD.** Marital Status **DIVORCED**
 Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 14, 85**

License Fee \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41966

LICENSE NO.

130523

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14th day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name NATHAN A. THOMAS

Age 24 Birthplace MD.
(State)

Groom's Residence 218 N. COLLINGTON AVE.

Marital Status SINGLE

Bride's Name PAMELA M. BROOKS

Age 23 Birthplace N. CAR.
(State)

Bride's Residence 140 N. COLLINGTON AVE.

Marital Status SINGLE

Relationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date NOV. 14 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985
SANDRA E. BANKS, CLERK

License Fee \$ 200

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41967

LICENSE NO.

130520

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ANDRE C. HOLMES

Age 22 Birthplace MD.
(State)

Groom's Residence 4303 YORK RD.

Marital Status SINGLE

Bride's Name OLABISI M. HOTONU

Age 26 Birthplace NIGERIA
(State)

Bride's Residence 4303 YORK RD.

Marital Status DIVORCED

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 55.00



License Date NOV. 14,

85

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41968

LICENSE NO.

130532

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES EARL WILLIAMS**

Age **25**

Birthplace **MD.**

(State)

Groom's Residence **4919 GOODNOW ROAD**

Marital Status **SINGLE**

Bride's Name **ALEASE BELINDA ASKEW**

Age **24**

Birthplace **MD.**

(State)

Bride's Residence **4919 GOODNOW ROAD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41969

LICENSE NO.

129523

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14TH day of NOVEMBER 9 1985
BALTIMORE, MD.

the following persons were by me united in marriage at
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

KWAKU CETASAAN

Age 35

Birthplace

MD.

(State)

Groom's

Residence

1425 W. LOMBARD STREET

Marital Status SINGLE

Bride's

Name

SANDRA A. DANCE

Age 27

Birthplace

MD.

(State)

Bride's

Residence

2923 WOODLAND AVENUE

Marital Status SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergyman or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 14 1985

SAUNDRA E. BANKS, CLERK

Signature-Clerk of the Court

License Fee - Resident \$25.00
Non-Resident \$

2

85-41970

Certificate of Marriage

State of Maryland

LICENSE NO.

130284

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH. day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DONALD EDMUND STOKES, JR

Age 25 Birthplace DELWARE
(State)

Groom's Residence 143 N. LINWOOD AV.

Marital Status SINGLE

Bride's Name JENNIFER LEE BURNETT

Age 19 Birthplace MD.
(State)

Bride's Residence 19 N. BELNORD AV.

Marital Status SINGLE

Relationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date OCT. 28 85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-15-85

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41971

LICENSE NO.

130534

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH. day of NOVEMBER ⁹ 1985

BALTIMORE, MD.

the following persons were by me united in marriage at _____

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

SAMUEL BRUTON, 3RD.

Age 24 Birthplace _____ (State) MD.Groom's
Residence

535 MOSHER ST.

Marital Status SINGLEBride's
Name

LESIA M. PAIGE

Age 24 Birthplace _____ (State) MD.Bride's
Residence

1112 STRICKER ST.

Marital Status SINGLERelationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on _____

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date NOV. 14 85License Fee \$ 25.00

NOV 15 1985

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41972

LICENSE NO.

130569

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES EDWARD ANDERSON, 2ND**

Age **24** Birthplace **MD.**
(State)

Groom's Residence **816 SEAGULL AV.**

Marital Status **SINGLE**

Bride's Name **YVONNE ANNETTE WRIGHT**

Age **23** Birthplace **MD.**
(State)

Bride's Residence **738 REEDBIRD AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

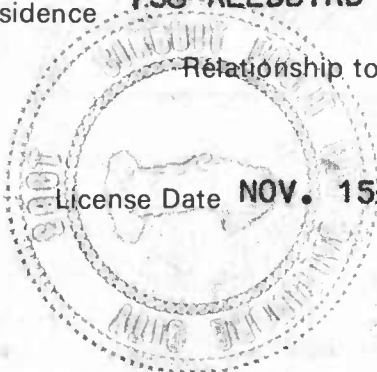
office on

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41973

LICENSE NO.

130531

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH. day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CLAYTON EARL SARVIS**

Age **27** Birthplace **N.C.**
(State)

Groom's Residence **1926 E. PRATT ST.**

Marital Status **SINGLE**

Bride's Name **PATTY ANN RANSOM**

Age **23** Birthplace **MD.**
(State)

Bride's Residence **1926 E. PRATT ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 15, 85**

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41974

LICENSE NO.

130044

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **NATHANIEL RATLIFF**

Age **28** Birthplace **S.C.**
(State)

Groom's Residence **5456 JONQUIL AVENUE**

Marital Status **SINGLE**

Bride's Name **SURTAINO YOLANDER LLOYD**

Age **26** Birthplace **MD.**
(State)

Bride's Residence **5456 JONQUIL AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **OCT. 17 85**

TT

License Fee \$ 25.00

NOV 15 1985

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41975

LICENSE NO.

130564

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15 day of NOV 9 19 85

BALTO MD

the following persons were by me united in marriage at _____
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WARREN MELVIN SCOTT**

Age **35** Birthplace **MD.**
(State)

Groom's Residence **2766 KINSEY AV.**

Marital Status **SINGLE**

Bride's Name **RENEE MICHELLE BARBARA JAMES**

Age **28** Birthplace **MD.**
(State)

Bride's Residence **2766 KINSEY AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date

NOV 15 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of the record in this

office on

NOV 15 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 15.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41976

Certificate of Marriage

State of Maryland

LICENSE NO.

130349

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 15TH. day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name PRESTON YUL BRYLNER REED, JR. Age 22 Birthplace MD.
(State)Groom's Residence 3803 PARKS HEIGHTS AVENUE Marital Status SINGLEBride's Name BRIGITTE DENEANE FOREMAN Age 18 Birthplace MD.
(State)Bride's Residence 5203 LIBERTY HEIGHTS Marital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41977

LICENSE NO.

129991

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15 day of NOV 9 19 85

the following persons were by me united in marriage at _____

BALTO MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

MICHAEL ANGELO WIMBUSH

Age 21

Birthplace MD.

(State)

Groom's
Residence

1720 E. FAYETTE STREET

Marital Status SINGLE

Bride's
Name

ANGELA MARIA WILLIAMS

Age 19

Birthplace MD.

(State)

Bride's
Residence

811 HYDE PARK RD. BALTO. CO., MD.

Marital Status SINGLE

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date

NOV 15 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-41978

LICENSE NO.
 130559

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 15TH. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ABDULHAMID ABDULKADIR**

Age **26** Birthplace **ETHIOPIA**
 (State)

Groom's Residence **3630 VALLEY TERR BALTO CO MD**

Marital Status **DIVORCED**

Bride's Name **FAKIHA TOFIK**

Age **16** Birthplace **ETHIOPIA**
 (State)

Bride's Residence **3630 VALLEY TERR BALTO CO MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

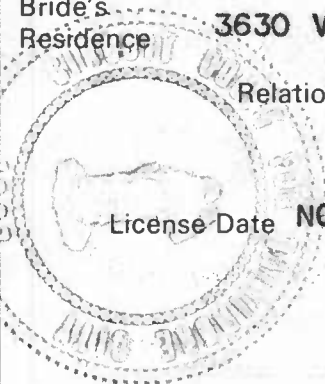
office on

NOV 15 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-41979

LICENSE NO.

130521

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15th day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

STEPHEN JOHN TANT, SR.

Age

18

Birthplace

MD.

(State)

Groom's

Residence

1041 RIVERSIDE AVENUE

Marital Status

SINGLE

Bride's
Name

KATHY JEAN FORRESTER

Age

18

Birthplace

MD.

(State)

Bride's

Residence

1041 RIVERSIDE AVENUE

Marital Status

SINGLE

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 15 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41980

LICENSE NO.

130169

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

FREDERICK L RAUH JR

Age

24

Birthplace

MD.

(State)

Groom's
Residence

5771 D HAZELWOOD CIRCLE

Marital Status

SINGLE

Bride's
Name

MARGARET C JIROUT

Age

22

Birthplace

MD.

(State)

Bride's
Residence

5771 D HAZELWOOD CIRCLE

Marital Status

SINGLE

NONE

Relationship to groom if any

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 15 85**

DEP. CLK.-CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 35.00

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41981

State of Maryland

LICENSE NO.

130542

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH. day of NOVEMBER 9 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**KEVIN ROACH**Age **29**

Birthplace

MD.

(State)

Groom's
Residence**814 MONROE ST**

Marital Status

SINGLEBride's
Name**VIVIAN WILSON**Age **41**

Birthplace

N Y

(State)

Bride's
Residence**814 MONROE ST**

Marital Status

SINGLE

Relationship to groom if any

NONE**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

License Date **NOV. 15** 85

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK**NOV 15 1985**License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and for forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41982

LICENSE NO.

130509

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH. day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

WILLIAM THOMAS JOHNSON

Age

44

Birthplace

MD.

(State)

Groom's
Residence

3330 EDMONDSON AVENUE

Marital Status

DIVORCED

Bride's
Name

FRANCES M. DARDEN

Age

28

Birthplace

VA.

(State)

Bride's
Residence

3330 EDMONDSON AVENUE

Marital Status

DIVORCED

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 15,**

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41983

LICENSE NO.

130551

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 15TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|--------------------------------|----------------|--------|------------|---------|
| Groom's Name | DERRELL R. JONES | Age | 35 | Birthplace | N. CAR. |
| | | | | (State) | |
| Groom's Residence | 3636 PASKIN PL. BALTO.CO., MD. | Marital Status | SINGLE | | |
| Bride's Name | TAYNA D. SANDERS | Age | 25 | Birthplace | N.Y. |
| | | | | (State) | |
| Bride's Residence | 3636 PASKIN PL. BALTO.CO., MD. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

License Date **NOV. 15,**

85

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

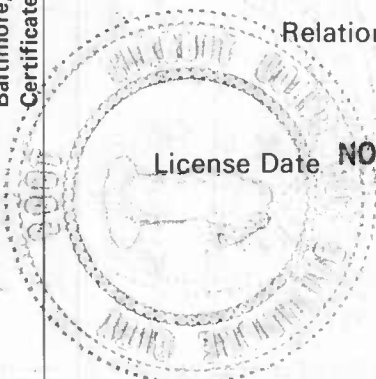
NOV 15 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-41984

Certificate of Marriage

State of Maryland

LICENSE NO.

130473

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 15th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

BRUCE E. BEST

Age 25 Birthplace BARBADOS, W.I.
(State)Groom's
Residence

3524 HAYWARD AVE.

Marital Status SINGLEBride's
Name

LINDA C. GRAVES

Age 22 Birthplace MD.
(State)Bride's
Residence

2340 NORFOLK ST.

Marital Status SINGLERelationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date

NOV 14

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 15 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41985

State of Maryland

LICENSE NO.

130710

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 25TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **LESTER FLEMING**Age **43** Birthplace **N.Y.**
(State)Groom's
Residence **4127 MT. WOOD RD.**Marital Status **DIVORCED**Bride's
Name **BARBARA A. SLOWE**Age **37** Birthplace **MD.**
(State)Bride's
Residence **4114 MT. WOOD RD.**Marital Status **WIDOW**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 25****85 DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41986

LICENSE NO.

130713

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 25TH. day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

CHESTER T. HARDISTY, 3rd

Age 18

Birthplace

MD.

(State)

Groom's
Residence

2605 REDMILES DR. BALTO. CO., MD.

Marital Status

SINGLE

Bride's

Name

SANDRA MAE LEONARD

Age 18

Birthplace

MD.

(State)

Bride's

Residence

201 DUKE OF YORK BALTO. CO., MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 25,

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on

NOV 25 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41987

State of Maryland

LICENSE NO.

130712

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 25TH. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **BERNARD JOSEPH REITER**Age **28** Birthplace **NEBRASKA**
(State)

Groom's

Residence **204 S. ATHOL AVENUE**Marital Status **DIVORCED**

Bride's

Name **ROBIN MONIQUE SANCHEZ**Age **26** Birthplace **MARYLAND**
(State)

Bride's

Residence **204 S. ATHOL AVENUE**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 25,****85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

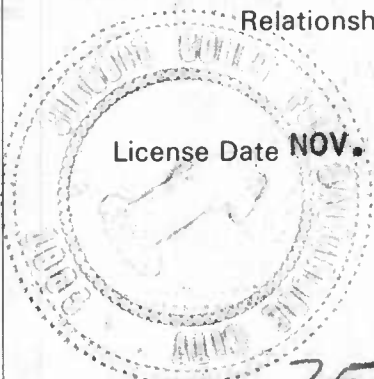
NOV 25 1985
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-41988

State of Maryland

LICENSE NO.

130613

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 25TH day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|-----------------------------|----------------|----------------------------|------------|------------|
| Groom's Name | JOSEPH L. OTTEY, SR. | Age | 47 | Birthplace | MD. |
| Groom's Residence | 306 GUSRAYAN ST. | Marital Status | DIVORCED (State) | | |
| Bride's Name | JOANNA B. MARSKI | Age | 40 | Birthplace | MD. |
| Bride's Residence | 306 GUSRYAN ST. | Marital Status | DIVORCED (State) | | |
| Relationship to groom if any | NONE | | | | |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 25 85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41989

 LICENSE NO.
130729

 Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

 I Hereby Certify that on the 26TH. day of NOVEMBER 9 1985

 the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's Name **IOANIS MELISSIDIS**

 Age **22** Birthplace **GREECE**
(State)

 Groom's Residence **535 S. WICKHAM STREET**

 Marital Status **SINGLE**

 Bride's Name **JULIE F. CAHAN**

 Age **35** Birthplace **MARYLAND**
(State)

 Bride's Residence **6414 ELRAY DR. BALTO. CO., MD.**

 Marital Status **SINGLE**

 Relationship to groom if any **NONE**
JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

 License Date **NOV 26 85** **DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee \$

25.00
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41990

State of Maryland

LICENSE NO.

130726

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26TH. day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **ROY BURNS**Age **61**

Birthplace

VA.

(State)

Groom's

Residence **3921 BOARMAN AV.**

Marital Status

SINGLE

Bride's

Name **ADDIE THOMPSON**Age **44**

Birthplace

VA.

(State)

Bride's

Residence **3921 BOARMAN AV.**

Marital Status

SINGLE

Relationship to groom if any

NONE**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 26,****85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41991

LICENSE NO.

130535

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26TH day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**WESLEY O WALLACE 3RD**Age **22**

Birthplace

MD.

(State)

Groom's
Residence**1811 E EAGER ST**

Marital Status

SINGLEBride's
Name**SHELIA A CARR**Age **21**

Birthplace

MD.

(State)

Bride's

4916 GUNTHER AVE

Residence

Marital Status

SINGLE**NONE**

Relationship to groom if any

BARBARA**J.****PITT**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

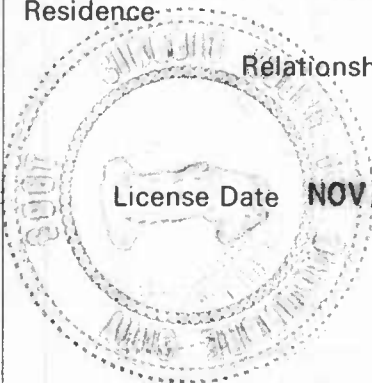
I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



License Date

NOV. 14,**85**License Fee \$ 25.00

2

85-41992

Certificate of Marriage

State of Maryland

LICENSE NO.

130703

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26TH. day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|------------------------------|----------------|-----------------|------------|----------------|
| Groom's Name | JAMES L. SLATER | Age | 63 | Birthplace | S. CAR. |
| | | | | (State) | |
| Groom's Residence | 3615 FOREST PARK AVE. | Marital Status | DIVORCED | | |
| Bride's Name | DOROTHY M. JEFFERSON | Age | 45 | Birthplace | S. CAR. |
| | | | | (State) | |
| Bride's Residence | 3615 FOREST PARK AVE. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

License Date **NOV. 26,****85****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK**NOV 26 1985**

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41993

State of Maryland

LICENSE NO.

129945

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26TH day of NOVEMBER ⁹ 19 85

the following persons were by me united in marriage at BALTIMORE, MD
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MILTON ALLEN STEVENSON, JR.**

Age **31** Birthplace **MD.**

Groom's Residence **5407 WABASH AVE.**

Marital Status **SINGLE**

Bride's Name **DIANE MC CROREY**

Age **30** Birthplace **MD.**

Bride's Residence **5407 WABASH AVE.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41994

LICENSE NO.

130312

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 6TH. day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **STEPHEN ROY BAUER**Age **22**

Birthplace

S.AFRICA

(State)

Groom's

Residence **931 ST. PAUL ST.**

Marital Status

SINGLE

Bride's

Name **BARBARA JO BAILEY**Age **30**

Birthplace

MD.

(State)

Bride's

Residence **931 ST. PAUL ST.**

Marital Status

SINGLERelationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date

NOV 1 85**DEPUTY CLERK - CIRCUITCOURT**

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 6 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-41995

State of Maryland

LICENSE NO.

130494

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22ND day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**JUAN FERNANDEZ**Age **26**

Birthplace

PERU

(State)

Groom's
Residence**1701 BOLTON ST.**

Marital Status

SINGLEBride's
Name**STACEY P. SMITH**Age **24**

Birthplace

PA.

(State)

Bride's
Residence**1701 BOLTON ST.**

Marital Status

SINGLERelationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 22 85** **DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

Signature — Clerk of the Court

NOV 22 1985
SANDRA E. BANKS, CLERK

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41996

Certificate of Marriage

State of Maryland

LICENSE NO.

130709

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 25TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

RAPHAEL

P.

KOURNIOTIS

Age

28

Birthplace

GREECE

(State)

Groom's

Residence

956 HILLSWOOD RD. BALTO.CO., MD.

Marital Status

DIVORCED

Bride's

Name

DINA

GLIMI

Age

23

Birthplace

GREECE

(State)

Bride's

Residence

956 HILLSWOOD RD. BALTO.CO., MD

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 25, 85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41997

Certificate of Marriage

State of Maryland

LICENSE NO.

130400

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 25th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DIREK N. MELLOAge 22 Birthplace GERMANY
(State)Groom's Residence 2414 ALBION AVE.Marital Status SINGLEBride's Name DE VELLE R. BROWNAge 21 Birthplace MD.
(State)Bride's Residence 4923 APT. A GOODNOW RD.Marital Status SINGLERelationship to groom if any NONELicense Date NOV. 25 85John F. Wankmull
Name of Officiating Clergy or Authorized OfficerDEP. CLK. CIRCUIT COURT OF BALTO. CITY
Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 11-25-85SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-41998

Certificate of Marriage

State of Maryland

LICENSE NO.

130448

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 25th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name GORDON E. MARTINAge 48 Birthplace NEW JERSEY
(State)Groom's Residence 3318 O'DONNELL STREETMarital Status DIVORCEDBride's Name BONITA LEE BROWNAge 43 Birthplace MARYLAND
(State)Bride's Residence 3318 O'DONNELL STREETMarital Status DIVORCEDRelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 25 85 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 25 1985License Fee \$ 55.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-41999

LICENSE NO.

130679

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22ND day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **FRANK VALENTINE, JR.**Age **30** Birthplace **MD.**

(State)

Groom's

Residence **1622 HOMESTEAD STREET**Marital Status **SINGLE**

Bride's

Name **DORMIN VERNITA FENNELL**Age **23** Birthplace **MD.**

(State)

Bride's

Residence **2609 ROBB STREET**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 22 85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42000

Certificate of Marriage

State of Maryland

LICENSE NO.

130698

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22nd day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)
in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **JAMES LEO WISNER**
Groom's
Residence **3027 NORTH WAY DRIVE.**

Age **27** Birthplace **MD.**
(State)

Marital Status **SINGLE**

Bride's
Name **CHERYL DENISE HUGHES**
Bride's
Residence **3027 NORTH WAY DRIVE.**

Age **22** Birthplace **MD.**
(State)

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 22 85**

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ **25.⁰⁰**

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42001

Certificate of Marriage

State of Maryland

LICENSE NO.

130164

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22ND. day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT L LIGHTNER**Age **31**Birthplace **MD.**

(State)

Groom's Residence **4914 GUNTHER AVE**

Marital Status

SINGLEBride's Name **LACHELLE D PUGH**Age **30**Birthplace **MD.**

(State)

Bride's Residence **4914 GUNTHER AVE**

Marital Status

SINGLE**NONE**

Relationship to groom if any

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **OCT 22 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

jw

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**NOV 22 1985**
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42002

LICENSE NO.

130699

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22ND day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|-------------------------|----------------|-----------------|------------|------------|
| Groom's Name | JESSE M. TROTMAN | Age | 47 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 4200 PARKTON ST. | Marital Status | DIVORCED | | |
| Bride's Name | MARTHA S. WHITE | Age | 49 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 4200 PARKTON ST. | Marital Status | WIDOW | | |
| Relationship to groom if any | NONE | | | | |

License Date **NOV. 22 85**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42003

State of Maryland

LICENSE NO.

128906

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22ND day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name EDWARD DAVIS, JR.

Age 32 Birthplace S. C.
(State)

Groom's

Residence 2113 TUCKER LANE

Marital Status SINGLE

Bride's

Name WANDA C. PIPKIN

Age 29 Birthplace MARYLAND
(State)

Bride's

Residence 2113 TUCKER LANE

Marital Status SINGLE

Relationship to groom if any NONE

JOHN WANKMILLER

Name of Officiating Clergyman or Authorized Officer

License Date

AUG 23 85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42004

Certificate of Marriage

State of Maryland

LICENSE NO.

130543

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22ND day of NOVEMBER 9 1985

BALTIMORE, MD.

the following persons were by me united in marriage at _____

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES D BROOKS**Age **32** Birthplace **ALA.**
(State)Groom's Residence **1703 HOLBROOK ST**Marital Status **DIVORCED**Bride's Name **LINDA F THOMPSON**Age **26** Birthplace **ALA.**
(State)Bride's Residence **1703 HOLBROOK ST**Marital Status **SINGLE**

Relationship to groom if any

NONE**JOHN WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 14 85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42005

Certificate of Marriage

State of Maryland

LICENSE NO.

130648

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22nd day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DOUGLAS A WEBB**Age **24** Birthplace **MD.**
(State)Groom's Residence **2716 FREDERICK RD BALTO CO MD**Marital Status **SINGLE**Bride's Name **DONNA M HINTON**Age **18** Birthplace **MD.**
(State)Bride's Residence **2716 FREDERICK RD BALTO CO MD**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 22 85** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42006

Certificate of Marriage

State of Maryland

LICENSE NO.

130667

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22 day of NOV 9 1985

BALTO MD

the following persons were by me united in marriage at _____

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT L. GLOVER**Age **50** Birthplace **GA.**
(State)Groom's Residence **108 N. SCHROEDER ST.**Marital Status **DIVORCED**Bride's Name **THERESA S. CAREY**Age **30** Birthplace **MD.**
(State)Bride's Residence **108 N. SCHROEDER ST.**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42007

Certificate of Marriage

State of Maryland

LICENSE NO.

130637

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22ND day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

RONALD W JEWELL

Age 23Birthplace MD.
(State)Groom's
Residence

6107 BURCHWOOD AVE

Marital Status

DIVORCEDBride's
Name

GAIL P MARZIALE

Age 32Birthplace MD.
(State)Bride's
Residence

6107 BURCHWOOD AVE

Marital Status

DIVORCED**NONE**

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date

NOV 20

85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

License Fee \$ 25.00SANDRA E. BANKS, CLERK
Signature of Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42008

LICENSE NO.

130427

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22ND day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|--------------------------------------|----------------|-----------------|------------|------------|
| Groom's Name | ALBERT L. EDWARDS | Age | 20 | Birthplace | MD. |
| Groom's Residence | 5 YAWMETER DR. BALTO.CO., MD. | Marital Status | SINGLE | | |
| Bride's Name | PENNY A. PERRY | Age | 21 | Birthplace | MD. |
| Bride's Residence | 6707 YOUNGSTOWN AVE. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

License Date **NOV. 14 85** JOAN C. ANDERSON
 Name of Officiating Clergy or Authorized Officer
DEP. CLK. - CIRCUIT COURT OF BALTO. CITY
 Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35.00

NOV 22 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42009

LICENSE NO.

130649

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22nd day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name THOR H. SOLHEIM

Age 57 Birthplace NORWAY
(State)

Groom's Residence 4757 HOMESDALE AVE.

Marital Status WIDOWER

Bride's Name ANNE G. KEYS

Age 51 Birthplace VA.
(State)

Bride's Residence 4757 HOMESDALE AVE.

Marital Status DIVORCED

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 22 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-42010

LICENSE NO.

130689

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22ND day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WAYNE T. LAVALEE**

Age **29** Birthplace **MASS.**
(State)

Groom's Residence **312 GREENGATE CT CARROLL CO MD**

Marital Status **SINGLE**

Bride's Name **JUDITH AGUIRRE**

Age **32** Birthplace **C. AMERICA**
(State)

Bride's Residence **2101 LINDEN LA MONT CO MD**

Marital Status **SINGLE**

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 22 85**

DEP. CLK.-CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42011

State of Maryland

LICENSE NO.

51750

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 20TH. day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name KALVIN B. RODGERSAge 25 Birthplace MD.

(State)

Groom's Residence 15 43 MONTIPLIER ST.

Marital Status

SINGLEBride's Name MICHELE D. PRICEAge 22 Birthplace MD.

(State)

Bride's Residence 613 E. CHASE ST.

Marital Status

SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergyman or Authorized Officer

85 DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 20 1985SAUNDRA E. BANKS, CLERK

Signature-Clerk of the Court

License Fee - Resident \$
Non-Resident \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

License Date AUG. 22,UPL. LIC. # 127189LIC. EXP. DEC. 12, 1985

2

Certificate of Marriage

85-42012

State of Maryland

LICENSE NO.

130260

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 20th day of Nov. 9 1985

the following persons were by me united in marriage at

Balto. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

WAYNE A.L. RAMOCAN

Age 23

Birthplace

JAMAICA

(State)

Groom's
Residence

9612 ORPIN RD BALTO CO MD

Marital Status

SINGLE

Bride's
Name

SANDRA M COAKLEY

Age 23

Birthplace

BAHAMAS

(State)

Bride's
Residence

9612 ORPIN RD BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

OCT 28 85

jw

Name of Officiating Clergy or Authorized Officer

Joan Anderson

Title and Religious Denomination or Office

Deputy Clerk Circuit Court

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-20-85

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42013

State of Maryland

LICENSE NO.

130630

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 20TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL B. BERMAN** Age **46** Birthplace **MD.**

(State)

Groom's Residence **3321 MORAVIA RD.** Marital Status **DIVORCED**Bride's Name **THERESA S. MARKS** Age **36** Birthplace **FLA.**

(State)

Bride's Residence **3321 MORAVIA RD.** Marital Status **SINGLE**Relationship to groom if any **NONE**JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 20, 85** **DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 20 1985License Fee \$ 25.00SAUNDRA E. BARKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42014

State of Maryland

LICENSE NO.

130297

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 20TH. day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**JOHN P WILLIAMS**Age **46**Birthplace **MD.**
(State)Groom's
Residence**610 S BRADFORD ST**

Marital Status

DIVORCEDBride's
Name**HAZEL M LONGMIRE**Age **50**Birthplace **MD.**
(State)Bride's
Residence**610 S BRADFORD ST**Marital Status
NONE**DIVORCED**

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 4, 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

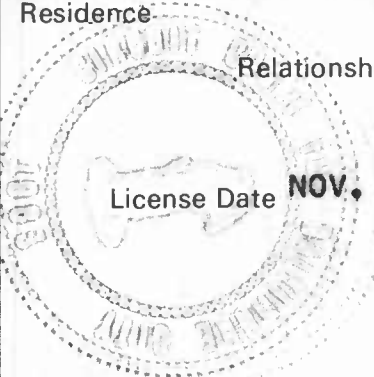
office on

NOV 20 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-42015

State of Maryland

LICENSE NO.

130587

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 20TH. day of NOVEMBER ⁹ 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **WILLIE MCNEILL, JR**Age **40**Birthplace **N.C.**

(State)

Groom's

Residence **2 SHARROW COURT. BALTO.CO., MD**Marital Status **DIVORCED**

Bride's

Name **JANNIE M. BROOKS**Age **36**Birthplace **MD.**

(State)

Bride's

Residence **8626 PIONEER DR. SEVERN, MD.**Marital Status **DIVORCED**

Relationship to groom if any

NONE**JOHN****F.****WANKMILLER**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42016

Certificate of Marriage

State of Maryland

LICENSE NO.

130644

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 20TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name BURNELL ALEXANDER PERKINSAge 31 Birthplace MD.
(State)Groom's Residence 2621 LOYOLA NORTHWAYMarital Status SINGLEBride's Name GWENDOLYN I. FORDAge 25 Birthplace MD.
(State)Bride's Residence 2621 LOYOLA NORTHWAYMarital Status SINGLERelationship to groom if any NONEJOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date NOV. 2085DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 20 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42017

Certificate of Marriage

State of Maryland

LICENSE NO.

130687

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22 day of NOV 9 1985

the following persons were by me united in marriage at BALTO MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES EVANS OLIVER, JR.**

Age 26 Birthplace MD.
(State)

Groom's Residence **2109 PENTLAND DRIVE**

Marital Status **SINGLE**

Bride's Name **SOPHIA ALICE BOONE**

Age 31 Birthplace N. C.
(State)

Bride's Residence **2109 PENTLAND DRIVE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date

NOV 22 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42018

Certificate of Marriage

State of Maryland

LICENSE NO.
130597

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 22 day of Nov. 9 1985

the following persons were by me united in marriage at

Balti. Md.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **JAMES FRANKLIN**

Age **31** Birthplace **MD.**
(State)

Groom's
Residence **2905 MT. HOLLY STREET**

Marital Status **SINGLE**

Bride's
Name **PRAMATIE RAMPERSAD**

Age **20** Birthplace **TRINIDAD**
(State)

Bride's
Residence **2712 GARRISON BLVD.**

Marital Status **SINGLE**

Relationship to groom if any

NONE

License Date **NOV 22 85**

J. F. Wantam
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42019

LICENSE NO.

130680

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 22ND day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BRIAN A SCOTT**Age **20** Birthplace **MD.**
(State)Groom's Residence **3656 PASCAL PL BALTO CO MD**Marital Status **SINGLE**Bride's Name **THERESA E EDWARDS**Age **18** Birthplace **N Y**
(State)Bride's Residence **3656 PASCAL PL BALTO CO MD**

Marital Status

SINGLE**NONE**

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 22 85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 22 1985**SAUNDRA E. BANKS, CLERK**

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42020

State of Maryland

LICENSE NO.

128782

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 21ST day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARK F. KISER**
Groom's Residence **3015 VIRGINIA AVENUE**

Age **28** Birthplace **WASH., D.C.**
(State)

Marital Status **SINGLE**

Bride's Name **CAROL P. DUNSTAN**
Bride's Residence **5256 CORDELIA AVENUE**

Age **23** Birthplace **JAMAICA**
(State)

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergyman or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

License Date **SEPT. 3** **85**

tt

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 21 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court.

License Fee

\$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42021

Certificate of Marriage

State of Maryland

LICENSE NO.

130657

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 21ST. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name STEVE INKOOK HONGAge 41 Birthplace KOREA
(State)Groom's Residence 111 HAMLET HILL ROADMarital Status DIVORCEDBride's Name YONG AE KIMAge 33 Birthplace KOREA
(State)Bride's Residence 111 HAMLET HILL ROADMarital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 21, 85DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

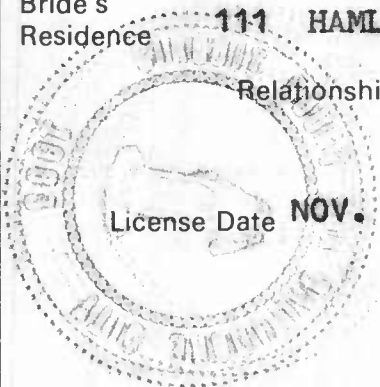
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 21 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-42022

LICENSE NO.

130566

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 21ST day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JEROME L. SOMERVILLE**

Age **46**

Birthplace **MD.**
(State)

Groom's Residence **1044 N. BROADWAY**

Marital Status **DIVORCED**

Bride's Name **JANIE R. WILLIS**

Age **36**

Birthplace **W. VA.**
(State)

Bride's Residence **1044 N. BROADWAY**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 21**

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 21 1985

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42023

State of Maryland

LICENSE NO.

130625

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 21ST. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BOBBY J. DIGGS**

Age **33** Birthplace **VA.**

(State)

Groom's Residence **4703 DELAWARE AVE.**

Marital Status **SINGLE**

Bride's Name **SHIRLEY HOUSE**

Age **32** Birthplace **MD.**

(State)

Bride's Residence **4703 DELAWARE AVE.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 21, 85**

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 21 1985

License Fee \$ 55.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-42024

Certificate of Marriage

State of Maryland

LICENSE NO.

129869

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1ST. day of NOVEMBER 9 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

CHARLES F WARD

Age 41

Birthplace

VA

(State)

Groom's
Residence

817 S FAGLEY ST

Marital Status

DIVORCED

Bride's
Name

MARY C VEST

Age 42

Birthplace

MD.

(State)

Bride's
Residence

817 S FAGLEY ST

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

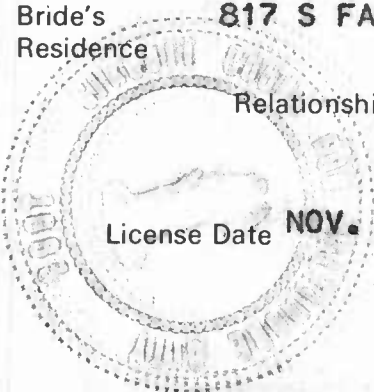
NOV 1 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-42025

Certificate of Marriage

State of Maryland

LICENSE NO.

130342

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1ST day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN CHRISTOPHER TANNER** Age **25** Birthplace **N. CAROLINA**
(State)

Groom's Residence **1555 MARLBORO PIKE P.G. CO., MD.** Marital Status **SINGLE**

Bride's Name **GWENDOLYN ROCHELLE ROLLINS** Age **22** Birthplace **NEW YORK**
(State)

Bride's Residence **1524 N. BOND STREET** Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1****85 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 1 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42026

Certificate of Marriage
State of Maryland

LICENSE NO.
 130327

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 1ST. day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
 Name **THOMAS TSATSOS**

Age **21** Birthplace **GREECE**
 (State)

Groom's
 Residence **2117 E. PRATT ST.**

Marital Status **SINGLE**

Bride's
 Name **KIMBERLY STEWART**

Age **22** Birthplace **MD.**
 (State)

Bride's
 Residence **2117 E. PRATT ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of the record filed in this

office on

NOV 1 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 1, 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42027

Certificate of Marriage

State of Maryland

LICENSE NO.

129634

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 31 day of OCT 9 19 85the following persons were by me united in marriage at BALTO MD
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

VENERANDO M CALDERON

Age 27 Birthplace PHILIPPINES
(State)Groom's
Residence

1902 PENROSE AVE

Marital Status SINGLEBride's
Name

MARIA R MEJIA

Age 27 Birthplace PHILIPPINES
(State)Bride's
Residence

7518 EAGLE WALK CT BALTO CO MD

Marital Status SINGLE

Relationship to groom if any

NONE

License Date

OCT 31 85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-1-85
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42028

LICENSE NO.

130326

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 31ST. day of OCTOBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **MITCHELL L. CURTIS**

Age **52** Birthplace **MD.**
(State)

Groom's
Residence **3809 WABASH AVENUE**

Marital Status **WIDOWER**

Bride's
Name **DEBORAH S. WILKENS**

Age **22** Birthplace **MD.**
(State)

Bride's
Residence **3809 WABASH AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 1 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **OCT. 31, 85**

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42029

State of Maryland

LICENSE NO.

130279

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 31ST. day of OCTOBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT JOHN CARMICHAEL, JR.** Age **40** Birthplace **MD.**
(State)
Groom's Residence **1507 SOUTH TOWER, 15 CHARLES PLAZA** Marital Status **WIDOWER**
Bride's Name **CONCETTA M. O'NEILL** Age **39** Birthplace **MD.**
(State)
Bride's Residence **1507 SOUTH TOWER, 15 CHARLES PLAZA** Marital Status **DIVORCED**
Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 28 85**DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 1 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42030

State of Maryland

LICENSE NO.

130269

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 31ST day of OCTOBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

GAYLLOYD C. LAWRENCE

Age 24 Birthplace MD.
(State)Groom's
Residence

4455 PALL MALL RD.

Marital Status SINGLEBride's
Name

BRIDGETTE D. LUNDY

Age 23 Birthplace VA.
(State)Bride's
Residence

69 S. MORLEY ST.

Marital Status SINGLERelationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date OCT. 31

85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

OCT 31 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 55.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42031

LICENSE NO.

130372

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4TH. day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **NATHANIEL TINCE WEAVER**

Age **31**

Birthplace **MD.**
(State)

Groom's Residence **1655 MC KEAN AVENUE**

Marital Status **DIVORCED**

Bride's Name **ANNETTE BERONICA CHAMBERS**

Age **22**

Birthplace **MD.**
(State)

Bride's Residence **1655 MC KEAN AVENUE**

Marital Status **SINGLE**

Relationship to groom if any

NONE

License Date

NOV. 4,

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clerk or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42032

Certificate of Marriage

State of Maryland

LICENSE NO.

130350

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1 day of NOV 9 1985the following persons were by me united in marriage at BALTO MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY A. ARRIVE**Age **27**Birthplace **MICHIGAN**
(State)Groom's Residence **2137 N. SMALLWOOD ST.**Marital Status **DIVORCED**Bride's Name **DENISE L. TATE**Age **25**Birthplace **PA.**
(State)Bride's Residence **3609 CEDARDALE RD.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 1 85****JW**

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42033

LICENSE NO.

130299

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 1ST. day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DAN R. MISTER, JR. Age 50 Birthplace MD.
(State)
Groom's Residence 2270 DRUID PARK DR. Marital Status WIDOWER
Bride's Name ROSEMARY S. WARD Age 34 Birthplace MD.
(State)
Bride's Residence 2270 DRUID PARK DR. Marital Status DIVORCED
Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

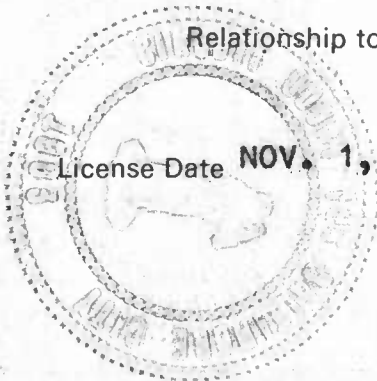
I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42034

Certificate of Marriage

State of Maryland

LICENSE NO.

130250

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1st day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES EDWIN THOMAS**Age **35**Birthplace **MD.**
(State)Groom's Residence **RT 4, BOX 46. LEXINGTON, PK., MD**Marital Status **DIVORCED**Bride's Name **CHARLESTINE DIANE CAIN**Age **35**Birthplace **MD.**
(State)Bride's Residence **219 N. CULVER ST. 21229**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
office on **NOV 1 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42035

Certificate of Marriage

State of Maryland

LICENSE NO.

130339

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 31st. day of NOV. 9 19 85the following persons were by me united in marriage at BALTIMORE, CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FRANK R. FERRARO** Age **38** Birthplace **MD.**
(State)Groom's Residence **2807 MONTEBELLO TERR.** Marital Status **DIVORCED**Bride's Name **DENISE C. DEL PINTO** Age **33** Birthplace **PA.**
(State)Bride's Residence **2807 MONTEBELLO TERR.** Marital Status **DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1 85**Title and Religious Denomination or Office
DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of record filed in this

office on NOV 1 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42036

Certificate of Marriage

State of Maryland

LICENSE NO.

130324

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 1ST day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ISAAC A. GAYLORD, JR.

Age 33 Birthplace MD.

(State)

Groom's Residence 902 N. CHESTER ST.

Marital Status

DIVORCED

Bride's Name EVERLENA M. HURST

Age 20 Birthplace MD.

(State)

Bride's Residence 2633 E. OLIVER ST.

Marital Status

SINGLE

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 1 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00NOV 1 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42037

Certificate of Marriage

State of Maryland

LICENSE NO.

129798

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1ST day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name JAMES HARRIS, JR.Age 33 Birthplace MD.
(State)Groom's
Residence 3716 OVERVIEW RD.Marital Status SINGLEBride's
Name PAULETTE V. PAYNEAge 41 Birthplace MD.
(State)Bride's
Residence 3716 OVERVIEW RD.Marital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 1 85DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this
office on NOV 1 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42038

Certificate of Marriage

State of Maryland

LICENSE NO.

129706

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1ST. day of NOVEMBER 9 1985BALTIMORE, MD.the following persons were by me united in marriage at _____
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **ROBERT CONRAD JACKSON**Age **24** Birthplace **MD.**
(State)Groom's
Residence **3314 W. BELVEDERE AV.**Marital Status **SINGLE**Bride's
Name **CINDY HENRIETTA SMITHWICK**Age **25** Birthplace **MD.**
(State)Bride's
Residence **3314 W. BELVEDERE AV.**Marital Status **SINGLE**Relationship to groom if any **NONE****CHARLES W. MACKEY**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1, 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 1 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42039

State of Maryland

LICENSE NO.

130208

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 1ST day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

3:15

Groom's Name JOSEPH ORLANDO WILLIAMS, JRAge 30Birthplace WASH. D.C.
(State)Groom's Residence 2213 TUCKER LANE.Marital Status SINGLEBride's Name AIDA EVA JONESAge 30Birthplace MD.
(State)Bride's Residence 3928 NOYES CIRCLE. BALTO.CO., MDMarital Status DIVORCEDRelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 2385DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 1 1985SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42040

State of Maryland

LICENSE NO.

130203

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 1ST day of NOVEMBER ⁹ 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

DALE A. MC CULLOUGH

Age 32

Birthplace MD.

Groom's
Residence

3207 RAVENWOOD AVE.

Marital Status

SINGLE

Bride's
Name

ROBIN L. FORMAN

Age 24

Birthplace MD.

Bride's

Residence

556 YALE AVE.

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEP. CLK. - CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 1 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42041

Certificate of Marriage

State of Maryland

LICENSE NO.

130376

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 4TH. day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **STEVE M. NICKENS**Age **37** Birthplace **MD.**
(State)Groom's Residence **6701 WILMONT DR. BALTO. CO., MD.** Marital Status **DIVORCED**Bride's Name **LAURA R. WILKINS**Age **33** Birthplace **MD.**
(State)Bride's Residence **39 N. BERNICE AVENUE** Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 4,** **85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **NOV 4 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42042

LICENSE NO.

130771

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **VILLARUEL ANGELES**Age **30** Birthplace **PHILIPPINES**

(State)

Groom's

Residence **324 S. PULASKI ST.**Marital Status **DIVORCED**

Bride's

Name **CECILIA MARIE WAY**Age **35** Birthplace **MD.**

(State)

Bride's

Residence **2112 ASHTON ST.**Marital Status **DIVORCED**

Relationship to groom if any

NONE**THERESA A. TUTMAN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29****85 DEP. CLK.-CIRCUIT COURT OF BALTO.CITY**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42043

 LICENSE NO.
130752

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
I Hereby Certify that on the 29TH. day of NOVEMBER 19 85

 the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **GERALD GRANT**Age 19 Birthplace MD.
(State)

Groom's

Residence **2226 E. MADISON ST.**Marital Status **SINGLE**

Bride's

Name **MICHELLE ROBERTS**Age 18 Birthplace MD.
(State)

Bride's

Residence **4104 NORFOLK AV.**Marital Status **SINGLE**

Relationship to groom if any

NONE**JOAN****C.****ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29, 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

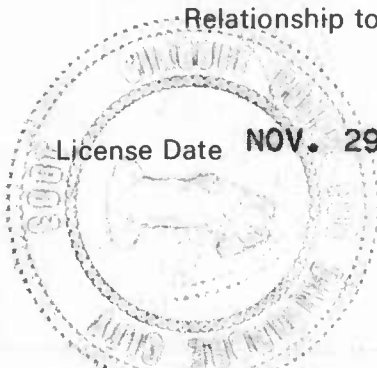
I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985
SAUNDRA E. BANKS, CLERK
License Fee \$ 55.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-42044

State of Maryland

LICENSE NO.

130805

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29TH. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

EDDIE PHILLIP BROWN, JR

Age 27

Birthplace

MD.

(State)

Groom's
Residence

2801 INDIANA ST.

Marital Status **DIVORCED**Bride's
Name

GENEVA JEAN WRIGHT

Age 24

Birthplace

MD.

(State)

Bride's

Residence 2424 EUTAW PL.

Marital Status **SINGLE**

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29,****85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42045

LICENSE NO.

130568

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EMMANUEL ANTONIO MASSEY**

Age **30** Birthplace **MD.**
(State)

Groom's Residence **4818 REISTERSTOWN RD.**

Marital Status **DIVORCED**

Bride's Name **DOROTHEA DELORES DORSEY**

Age **32** Birthplace **MD.**
(State)

Bride's Residence **3645 PARK HEIGHTS AV.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 29,**

85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-42046

LICENSE NO.
 130361

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **SAMUEL D. TRESS** Age **37** Birthplace **MD.**
(State)
 Groom's Residence **1717 S. HANOVER STREET** Marital Status **DIVORCED**
 Bride's Name **PATRICIA ELIZABETH FAGAN** Age **24** Birthplace **MD.**
(State)
 Bride's Residence **6910 DEVALE PLACE BALTO. CO., MD.** Marital Status **SINGLE**
 Relationship to groom if any **NONE**

License Date

NOV. 29 85

JOAN C. ANDERSON
 Name of Officiating Clergy or Authorized Officer
DEPUTY CLERK-CIRCUIT COURT
 Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-42047

LICENSE NO.
 130789

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GEORGE E. SIGLER**

Age **27** Birthplace **MD.**
(State)

Groom's Residence **562 5th AVENUE**

Marital Status **SINGLE**

Bride's Name **JOANN L. PERRY**

Age **31** Birthplace **MD.**
(State)

Bride's Residence **562 5th AVENUE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29**

85 DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42048

LICENSE NO.

130735

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|--------------------|----------------|----------|------------|-------------|
| Groom's Name | WALTER J. HORTON | Age | 34 | Birthplace | (State) MD. |
| Groom's Residence | 4014 KATHLAND AVE. | Marital Status | DIVORCED | | |
| Bride's Name | ROSALEE WINSTEAD | Age | 32 | Birthplace | (State) MD. |
| Bride's Residence | 4014 KATHLAND AVE. | Marital Status | DIVORCED | | |

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29

85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

NOV 29 1985
SANDRA E. BANKS CLERK

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42049

 LICENSE NO.
130176

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
 I Hereby Certify that on the 29TH day of NOVEMBER 19 85

 the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**THOMAS E WYATT**Age **50**

Birthplace

MD.
(State)Groom's
Residence**515 CAMPBELL LA**

Marital Status

DIVORCEDBride's
Name**GLORIA A HARRISON**Age **36**

Birthplace

MD.
(State)Bride's
Residence**515 CAMPBELL LA**

Marital Status

DIVORCED**NONE**

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29 85****DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

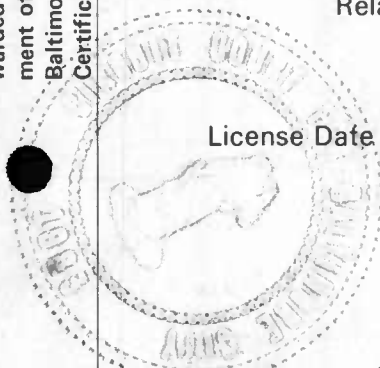
office on

NOV 29 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-42050

State of Maryland

LICENSE NO.

130796

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN B. ALSTON, 3RD**

Age **26** Birthplace **MD.**
(State)

Groom's Residence **3222 RAVENWOOD AV.**

Marital Status **SINGLE**

Bride's Name **BONITA CHAMBERS TOYE**

Age **34** Birthplace **MD.**
(State)

Bride's Residence **3222 RAVENWOOD AV.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

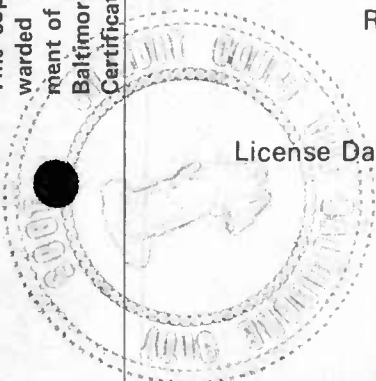
SAUNDRA E. BANKS, CLERK

Signature Clerk of the Court

License Date **NOV. 29 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

State of Maryland

85-42051

LICENSE NO.

130707

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29th day of November 9 1985

the following persons were by me united in marriage at BALTIMORE, MARYLAND
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL DENNIS LARKINS**

Age **36** Birthplace **MD.**
(State)

Groom's Residence **1929 LEMMON STREET**

Marital Status **DIVORCED**

Bride's Name **WANDA SUE MERRICK**

Age **28** Birthplace **VA.**
(State)

Bride's Residence **1929 LEMMON STREET**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

JOAN C. ANDERDSON

Name of Officiating Clergy or Authorized Officer

License Date **Nov. 29, 85** **DEPUTY CLERK, CIRCUIT COURT FOR BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 29 1985
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42052

Certificate of Marriage

State of Maryland

LICENSE NO.

130721

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|---------------------------------------|----------------|-----------------|------------|------------|
| Groom's Name | EDWARD V. DASCH | Age | 48 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 5694 LEIDEN RD. BALTO.CO.,MD. | Marital Status | DIVORCED | | |
| Bride's Name | CAROLE A. MORRIS | Age | 38 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 5694 LEIDEN RD. BALTO. CO.,MD. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29 85** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on **NOV 29 1985**
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42053

LICENSE NO.

130603

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29th day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JEROME

DANGERFIELD

Age 44

Birthplace

MD.

(State)

Groom's
Residence

2409

E. CHASE

ST.

Marital Status

DIVORCED

Bride's
Name

AGNES

A.

LEE

Age 32

Birthplace

MD.

(State)

Bride's
Residence

904

E. NORTH

AVE.

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

License Date

NOV 20

85

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42054

State of Maryland

LICENSE NO.

130755

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**MURID HUSSAIN SHAH**Age **39**Birthplace **PAKISTAN**
(State)Groom's
Residence**4109 LIBERTY HGTS AVE**Marital Status **SINGLE**Bride's
Name**MARIA D ELLISON**Age **46** Birthplace **BRAZIL**
(State)Bride's
Residence**4109 LIBERTY HGTS AVE**Marital Status **DIVORCED**
NONE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29 85** **DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42055

State of Maryland

LICENSE NO.

130734

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29TH day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

DAVID LEO TEABOUT

Age

23

Birthplace

MD.

(State)

Groom's
Residence

5611 HADDON AVENUE

Marital Status

SINGLE

Bride's
Name

TERREAL LAZET GRANT

Age

21

Birthplace

MD.

(State)

Bride's
Residence

1608 LOCHWOOD AVENUE

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

License Date

NOV 27

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SALINDA F. BANKS, CLERK

License Fee \$

25.00

NOV 29 1985

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42056

State of Maryland

LICENSE NO.

130692

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29th day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL C. VAETH**

Age **25** Birthplace **MD.**
(State)

Groom's Residence **627 N. ROSE STREET**

Marital Status **DIVORCED**

Bride's Name **CAROL L. POOLE**

Age **24** Birthplace **MD.**
(State)

Bride's Residence **627 N. ROSE STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 26 85**

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ **25.12**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42057

Certificate of Marriage
State of Maryland

LICENSE NO.
 130725

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|-----------------|----------------|----------|------------------------|-----|
| Groom's Name | JERRY D EDWARDS | Age | 22 | Birthplace | MD. |
| | | | | <small>(State)</small> | |
| Groom's Residence | 2012 RAMSEY ST | Marital Status | SINGLE | | |
| Bride's Name | ROSENA M KIM | Age | 23 | Birthplace | MD. |
| | | | | <small>(State)</small> | |
| Bride's Residence | 2012 RAMSEY ST | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42058

Certificate of Marriage

State of Maryland

LICENSE NO.

130780

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

CRAIG A HURWITZ

Age 29

Birthplace

TEXAS

(State)

Groom's
Residence

506 CATHDERAL ST

Marital Status

SINGLE

Bride's
Name

SUZANNE HUTCHISON

Age 28

Birthplace

CONN

(State)

Bride's
Residence

506 CATHDERAL ST

Marital Status

SINGLE

Relationship to groom if any

NONE

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

License Date NOV. 27 85

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42059

Certificate of Marriage

State of Maryland

LICENSE NO.

130655

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

RONALD W COOK

Age 33

Birthplace MD.

Groom's
Residence

3216 W GARRISON AVE

Marital Status

(State) DIVORCED

Bride's
Name

SHIRLEY A RAVENELL

Age 30

Birthplace N Y

Bride's
Residence

3216 W GARRISON AVE

Marital Status
NONE

SINGLE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42060

 LICENSE NO.
130820

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)
I Hereby Certify that on the 29TH day of NOVEMBER 19 85

 the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's Name **DAVID R. BOESHORE, JR.**

 Age **24** Birthplace **MD.**
(State)

 Groom's Residence **3638 LYNDAL AVE**
Marital Status **SINGLE**
 Bride's Name **JOANNE P. NEWELL**

 Age **25** Birthplace **MD.**
(State)

 Bride's Residence **3507 KENYON AVENUE**
Marital Status **SINGLE**
 Relationship to groom if any **NONE**
JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

 License Date **NOV. 29 85**
DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00
SAUNDRA E. BANKS, CLERK
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage
State of Maryland

85-42061

LICENSE NO.
 130547

Copy for State Department of Health and Mental Hygiene
BALTIMORE CITY (30)

I Hereby Certify that on the 29th day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JULIUS HAYNAL**
 Groom's Residence **1924 HARMAN AV.**

Age **60** Birthplace **EUROPE**
(State)

Marital Status **SINGLE**

Bride's Name **KATHARINA RACK**
 Bride's Residence **1924 HARMAN AV.**

Age **56** Birthplace **EUROPE**
(State)

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42062

Certificate of Marriage

State of Maryland

LICENSE NO.

130620

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of NOVEMBER 9 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name NATHAN E. HECTORAge 18 Birthplace MD.
(State)Groom's Residence 805 BELGIAN AVENUEMarital Status SINGLEBride's Name JACKIE JOHNSONAge 17 Birthplace MD.
(State)Bride's Residence 222 S. MT. OLIVET LANEMarital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 20 85DEP. CLK. - CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 29 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42063

Certificate of Marriage

State of Maryland

LICENSE NO.

130779

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29TH day of NOVEMBER 9 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

SAM JOSEPH BETTY JR

Age 37

Birthplace

JAMAICA

(State)

Groom's
Residence

2319 ANOKA AVE

Marital Status

SINGLE

Bride's
Name

CORRINE SONIA BOONE

Age 19

Birthplace

MD.

(State)

Bride's
Residence

2319 ANOKA AVE

Marital Status

SINGLE

NONE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42064

State of Maryland

LICENSE NO.

130475

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|------------------------------|----------------|----------|------------|-----|
| Groom's Name | CHARLES D. LLOYD | Age | 29 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 61 BENONI CIR. BALTO.CO.,MD. | Marital Status | SINGLE | | |
| Bride's Name | CASANDRA M. HUGHLETT | Age | 33 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 61 BENONI CIR. BALTO.CO.,MD. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

THERESA A. TUTMAN

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42065

LICENSE NO.

129830

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 9 1985

BALTIMORE, MD.

the following persons were by me united in marriage at _____

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **WILLIE LEE JONES**

Age **50** Birthplace **N. CAROLINA**
(State)

Groom's
Residence **1124 STOCKTON STREET**

Marital Status **SINGLE**

Bride's
Name **RUTHIE MAE BENTION**

Age **52** Birthplace **N. CAROLINA**
(State)

Bride's
Residence **1124 STOCKTON STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29**

85 DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of the original filed with me

officer **SAUNDRA E. BANKS, CLERK**

NOV 29 1985

License Fee \$ 5.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42066

State of Maryland

LICENSE NO.

130834

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name JON E. RICEAge 23 BirthplaceN. CAR.

(State)

Groom's
Residence 127 WILLOWDALE DR. FREDERICK CO., MD.

Marital Status

SINGLEBride's
Name MARCIA K. MC MAHANAge 24 BirthplaceWI.

(State)

Bride's
Residence 201 CRAIN CT. A.A. CO., MD.

Marital Status

SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29, 85DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985License Fee \$ 35.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42067

State of Maryland

LICENSE NO.

130276

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY KARL KEARSE**Age **23** Birthplace **MD.**
(State)Groom's Residence **3720 WINDSORMILL RD.**Marital Status **SINGLE**Bride's Name **GEORGETTE CHESTNUT**Age **25** Birthplace **MD.**
(State)Bride's Residence **3720 WINDSORMILL RD.**Marital Status **SINGLE**Relationship to groom if any **NONE****THERESA A. TUTMAN**

Name of Officiating Clergy or Authorized Officer

License Date **OCT 28 85** **DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 55.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

NOV 29 1985

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42068

State of Maryland

LICENSE NO.

130289

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 4TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **ROGER ELLIS**Age **28** Birthplace **MISSOURI**
(State)

Groom's

Residence **1802 GREENWICH WOODS DR. HOWARD CO., MD.** Marital Status **SINGLE**

Bride's

Name **MARCIA MARIE ELLIOTT**Age **27** Birthplace **JAMAICA**
(State)

Bride's

Residence **1236 DAMSEL RD. BALTO. CO., MD.** Marital Status **DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 28****85****DEP. CLK.-CIRCUIT COURT OF BALTO.CITY**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42069

State of Maryland

LICENSE NO.

130576

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 27TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **WILLIAM TIMOTHY CLISHAM**Age **51**

Birthplace

MD.

(State)

Groom's

Residence **3409 UNIVERSITY PLACE**

Marital Status

DIVORCED

Bride's

Name **ELIZABETH PATTESON GILLIAM**Age **33**

Birthplace

N.J.

(State)

Bride's

Residence **3409 UNIVERSITY PLACE**

Marital Status

DIVORCED

Relationship to groom if any

NONE**JOAN****C.****ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

License Date **NOV. 27,****85**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

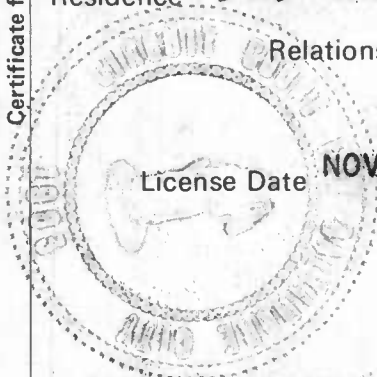
office on

NOV 27 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 35.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-42070

Certificate of Marriage

State of Maryland

LICENSE NO.

130720

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26 day of NOV 9 19 85the following persons were by me united in marriage at BALTO MD
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name **WILLIAM GARFIELD DUNSTON**Age **53** Birthplace **N.C.**
(State)Groom's
Residence **4119 COLEMAN AV.**Marital Status **DIVORCED**Bride's
Name **EDNA WILLIAMS**Age **35** Birthplace **MD.**
(State)Bride's
Residence **4119 COLEMAN AV.**Marital Status **DIVORCED**Relationship to groom if any **NONE**

License Date

NOV 26

85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office
DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

11-26-85

License Fee \$

25⁰⁰**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42071

Certificate of Marriage

State of Maryland

LICENSE NO.

130103

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26TH. day of NOVEMBER 9 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

STERLING H MITCHELL SR

Age 28Birthplace MD.

(State)

Groom's
Residence

6617 TOUCHSTONE CT

Marital Status

SINGLEBride's
Name

BARBARA BROWN

Age 33Birthplace S. CAR

(State)

Bride's
Residence

2801 VIRGINIA AVE

Marital Status
NONESINGLE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 5,85DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42072

State of Maryland

LICENSE NO.

130539

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name**JOSEPH BUSTER, JR**Age **37**

Birthplace

MD.

(State)

Groom's
Residence**1700 DRUID HILL AV.**

Marital Status

SINGLEBride's
Name**SAYYEDAH ALEEM**Age **20**

Birthplace

N.Y.

(State)

Bride's
Residence**1700 DRUID HILL AV.**

Marital Status

SINGLE

Relationship to groom if any

NONE**JOAN****C.****ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **NOV. 26,** **85**

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42073

Certificate of Marriage

State of Maryland

LICENSE NO.

130536

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 26th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN WINSTON MILSTRED, JR**Age **25** Birthplace **MD.**
(State)Groom's Residence **2610 HAMPDEN AV.**Marital Status **SINGLE**Bride's Name **RUTH TRACEY BRIDGMAN**Age **17** Birthplace **MD.**
(State)Bride's Residence **2610 HAMPDEN AV.**Marital Status **SINGLE**Relationship to groom if any **NONE**JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 26 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be given by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42074

Certificate of Marriage

State of Maryland

LICENSE NO.

130282

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LARRY HUTCHINSON**Age **31** Birthplace **N. C.**
(State)Groom's Residence **10 ALTURA CT. BALTO.CO.,MD.**Marital Status **SINGLE**Bride's Name **DIANE P. SMITH**Age **32** Birthplace **MD.**
(State)Bride's Residence **10 ALTURA CT. BALTO.CO.,MD.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 4 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42075

State of Maryland

LICENSE NO.

129441

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JAMES HANDY, BEY

Age 43

Birthplace

MD

(State)

Groom's
Residence

503 E 36th ST

Marital Status

DIVORCED

Bride's
Name

VALERIE E LEE

Age 31

Birthplace

MD

(State)

Bride's
Residence

503 E 36th ST

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergyman or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

License Date SEPT 16 85

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

SAUNDRA E. BANKS, CLERK

Signature-Clerk of the Court

License Fee - Resident \$25.00
Non-Resident \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42076

State of Maryland

LICENSE NO.

130813

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **HON ANDRE SATCHELL**Age **24**

Birthplace

MD.

(State)

Groom's

Residence **4712 GREENSPRING AV.**

Marital Status

SINGLE

Bride's

Name **PAIGE RENEE PULLEN**Age **23**

Birthplace

MD.

(State)

Bride's

Residence **4712 GREENSPRING AV.**

Marital Status

SINGLE

Relationship to groom if any

NONE**THERESA A. TUTMAN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29****85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42077

LICENSE NO.

130783

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 27TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

WAYNE HILL

Age 28

Birthplace

MD.

(State)

Groom's Residence

932 N CHAPEL ST

Marital Status

DIVORCED

Bride's Name

TERESA M JONES

Age 26

Birthplace

MD.

(State)

Bride's Residence

932 N CHAPEL ST

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOHN

F.

WANKMILLER

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

DEPUTY CLERK - CIRCUIT COURT

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date NOV. 27 85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42078

Certificate of Marriage

State of Maryland

LICENSE NO.

130565

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 27TH day of NOVEMBER 9 1985
BALTIMORE, MD.

the following persons were by me united in marriage at _____
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD GYAMFI**
Groom's Residence **5919 RADECKE AVE.**

Age **36** Birthplace **GHANA**
(State)
Marital Status **DIVORCED**

Bride's Name **LUCY BANNOR**
Bride's Residence **5919 RADECKE AVE.**

Age **23** Birthplace **GHANA**
(State)
Marital Status **SINGLE**

Relationship to groom if any **NONE**

J. F. Wankam

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 22****85 DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35.00

NOV 27 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

12: 12

2

Certificate of Marriage

85-42079

State of Maryland

LICENSE NO.

130722

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 27TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RONALD J. KODLICK**Age **44** Birthplace **PA.**
(State)Groom's Residence **135 W. HILL ST.**Marital Status **DIVORCED**Bride's Name **GLADYS C. WHEELER**Age **39** Birthplace **MD.**
(State)Bride's Residence **135 W. HILL ST.**Marital Status **SINGLE**Relationship to groom if any **NONE**

JOHN WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **NOV. 27****85**

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42080

LICENSE NO.
130550

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 27TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|--------------------------|----------------|-----------------|------------|-------------|
| Groom's Name | HARRIS Z. CARMEL | Age | 58 | Birthplace | N.Y. |
| | | | | (State) | |
| Groom's Residence | 3700 BARTWOOD RD. | Marital Status | DIVORCED | | |
| Bride's Name | NANCY B. SEIDMAN | Age | 39 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 3700 BARTWOOD RD. | Marital Status | SINGLE | | |

Relationship to groom if any

NONE**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42081

State of Maryland

LICENSE NO.

130769

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 27TH day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

ANTHONY PETER COLLINS

Age 26

Birthplace **TRINIDAD**
(State)

Groom's
Residence

3635 LIBERTY HEIGHTS AVENUE

Marital Status **SINGLE**

Bride's
Name

CHERYL JEAN BARNES

Age 30 Birthplace **MARYLAND**
(State)

Bride's
Residence

P.O. BOX # 54 VILLAGE ROAD

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

BARBARA PITT

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 27 85**

DEP. CLK. - CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and for-
warded to the Division of Vital Records, State Depart-
ment of Health and Mental Hygiene, 201 W. Preston Street,
Baltimore, MD 21201, upon receipt of page 3, copy of
Certificate for Clerk of Court.

2

Certificate of Marriage

85-42082

State of Maryland

LICENSE NO.

130188

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 27th day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|---------------------------------------|----------------|-----------------|------------|------------|
| Groom's Name | WILLIAM G. BORY | Age | 24 | Birthplace | MD. |
| | | | | (State) | |
| Groom's Residence | 2621 WINDSOR RD. BALTO.CO.,MD. | Marital Status | SINGLE | | |
| Bride's Name | WILMA L. LIPSCOMB | Age | 25 | Birthplace | MD. |
| | | | | (State) | |
| Bride's Residence | 1128 STEIGER WAY | Marital Status | DIVORCED | | |

Relationship to groom if any **NONE**

JOHN WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination of Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on **NOV 27 1985**

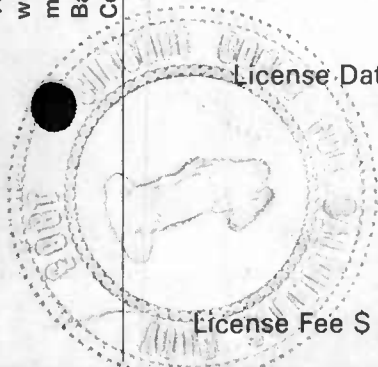
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **OCT. 25 85**

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

Certificate of Marriage

85-42083

State of Maryland

LICENSE NO.

130770

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 27 day of NOV 9 19 85

the following persons were by me united in marriage at BALTO MD
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MILAN KOSANOVICH

Age 26 Birthplace ILL.
(State)

Groom's Residence DOVER, NEW JERSEY

Marital Status SINGLE

Bride's Name KARLENE A. HOO

Age 26 Birthplace JAMAICA
(State)

Bride's Residence DOVER, NEW JERSEY

Marital Status SINGLE

Relationship to groom if any NONE

BARBARA J. PITT

Name of Officiating Clergy or Authorized Officer

License Date NOV 27 85

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on NOV 27 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

JW

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42084

State of Maryland

LICENSE NO.

130781

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 27TH. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|-------------------|-----------------------|-----|----------------|------------|------|
| Groom's Name | MARTIN E. DUPONT | Age | 25 | Birthplace | N.Y. |
| | | | | (State) | |
| Groom's Residence | HOPATCONG, NEW JERSEY | | Marital Status | WIDOWER | |
| Bride's Name | MARILYN S. MANTANI | Age | 31 | Birthplace | N.Y. |
| | | | | (State) | |
| Bride's Residence | ANDOVER, NEW JERSEY | | Marital Status | SINGLE | |

Relationship to groom if any NONE

JOHN C, ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 27, 85**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 27 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42085

Certificate of Marriage

State of Maryland

LICENSE NO.

130740

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 26TH day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

JOHN H KNOEBEL

Age **44**

Birthplace

N Y

(State)

Groom's
Residence

PEEKSKILL N Y

Marital Status

SINGLE

Bride's
Name

BARBARA M RICHARDSON

Age **46**

Birthplace

N CAR

(State)

Bride's
Residence

PEEKSKILL N Y

Marital Status

SINGLE

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 26 85**

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 26 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42086

LICENSE NO.

130662

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29TH. day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|---------------------------|----------------|-----------------|------------|------------|
| Groom's Name | JAMES W. GOLDSTEIN | Age | 41 | Birthplace | PA. |
| | | | | (State) | |
| Groom's Residence | YORK, PA. | Marital Status | DIVORCED | | |
| Bride's Name | PATRICIA M. KERN | Age | 31 | Birthplace | PA. |
| | | | | (State) | |
| Bride's Residence | YORK, PA. | Marital Status | DIVORCED | | |
| Relationship to groom if any | NONE | | | | |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29,****85**

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42087

Certificate of Marriage

State of Maryland

LICENSE NO.

130792

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

RONALD DIXON

Age 25

Birthplace

N J

(State)

Groom's
Residence

TRENTON N J

Marital Status

SINGLE

Bride's
Name

TAMMY L CARPENTER

Age 21

Birthplace

N J

(State)

Bride's
Residence

TRENTON N J

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date NOV. 29 85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42088

State of Maryland

LICENSE NO.

130402

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 29th day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

| | | | | | |
|------------------------------|--------------------------|----------------|---------------|------------|-------------------------|
| Groom's Name | NIMISH C. M. SHAH | Age | 19 | Birthplace | KENYA (State) |
| Groom's Residence | WASHINGTON D.C. | Marital Status | SINGLE | | |
| Bride's Name | TAMMY L. JACOBS | Age | 17 | Birthplace | MD. (State) |
| Bride's Residence | 611 WYETH ST. | Marital Status | SINGLE | | |
| Relationship to groom if any | NONE | | | | |

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV 29 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

NOV 29 1985

tt

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42089

LICENSE NO.

130800

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29TH day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's
Name

ROBERT DELANCEY

Age **27**

Birthplace

N.Y.

(State)

Groom's
Residence

QUEENS N.Y.

Marital Status

SINGLE

Bride's
Name

REGINA E PIERCE

Age **27**

Birthplace

N Y

(State)

Bride's
Residence

QUEENS N.Y.

Marital Status

SINGLE

NONE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 29 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **NOV. 29N 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42090

State of Maryland

LICENSE NO.

130281

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 1ST day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name BAHAAELDIN MAHMOUD MOHAMED KARRA Age 33 Birthplace EGYPT
 Groom's Residence 2222 KING PLACE NW. WASHINGTON, D.C. Marital Status SINGLE
 Bride's Name PAMELA D. JONES Age 26 Birthplace MD.
 Bride's Residence 3015 THORDELL AV. Marital Status SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 1 85 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

NOV 1 1985
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

State of Maryland

85-42091

LICENSE NO.

130676

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 21ST day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM B FRICK JR**

Age 19 Birthplace **DEL.**
(State)

Groom's Residence **MIDDLETON PA**

Marital Status

SINGLE

Bride's Name **CHRISTINE HEALY**

Age 15 Birthplace **DEL.**
(State)

Bride's Residence **MIDDLETON PA**

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date **NOV. 21**

85

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on **NOV 21 1985**

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42092

Certificate of Marriage

State of Maryland

LICENSE NO.

130673

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 21 ST day of NOVEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name THOMAS E. CLARK

Age 29 Birthplace N.J.
(State)

Groom's Residence HACKENSACK, N.J.

Marital Status SINGLE

Bride's Name ANITA RICH

Age 28 Birthplace N.J.
(State)

Bride's Residence HACKENSACK, N.J.

Marital Status SINGLE

Relationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date NOV. 21 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 21 1985
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42093

Certificate of Marriage

State of Maryland

LICENSE NO.

130592

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 18TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TALIP APAYDIN**Age **21** Birthplace **TURKEY**
(State)Groom's Residence **WARWICK R.I.**Marital Status **SINGLE**Bride's Name **GULHAN AKTURK**Age **40** Birthplace **TURKEY**
(State)Bride's Residence **WARWICK R.I.**Marital Status **DIVORCED**
NONE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 18****85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of the record filed in this

office on

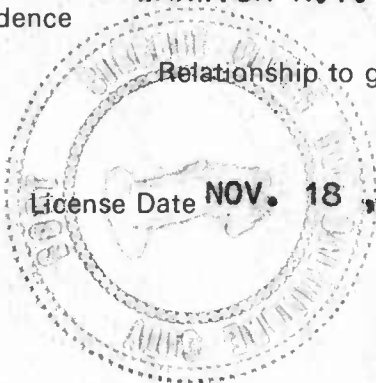
NOV 18 1985

License Fee \$

25.00**SAUNDRA E. BAKER, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-42094

Certificate of Marriage

State of Maryland

LICENSE NO.

130461

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 8TH. day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TIMOTHY M. BOWEN**Age **31** Birthplace **N.Y.**

(State)

Groom's Residence **YONKERS, NEW YORK**Marital Status **SINGLE**Bride's Name **SUSAN A. YOUKET**Age **33** Birthplace **N.Y.**

(State)

Bride's Residence **YONKERS, NEW YORK**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 8, 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 8 1985
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42095

Certificate of Marriage

State of Maryland

LICENSE NO.

130482

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 12TH day of NOVEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **NICHOLAS J. SPISHOCK**Age **28** Birthplace **PA.**
(State)Groom's Residence **GRANTVILLE, PENNSYLVANIA**Marital Status **SINGLE**Bride's Name **ANGELINA M. WELLER**Age **20** Birthplace **N.Y.**
(State)Bride's Residence **GRANTVILLE, PENNSYLVANIA**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 12****85 DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-42096

Certificate of Marriage

State of Maryland

LICENSE NO.

130481

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 12 day of NOV 9 19 85the following persons were by me united in marriage at BALTO MD
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOSEPH CIENIAWA**Age **20** Birthplace **PA.**
(State)Groom's Residence **NEMBERG, PA.**Marital Status **SINGLE**Bride's Name **ANNA M. HALL**Age **19** Birthplace **PA.**
(State)Bride's Residence **NEMBERG, PA.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date

NOV 12 85

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 12 1985License Fee \$ 25.00**SAUNDRA E. BARRIS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42097

State of Maryland

LICENSE NO.

129126

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4TH. day of NOVEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **EDWARD J. FRANTZ**Age **21** Birthplace **PA.** (State)

Groom's

Residence **POTTSVILLE, PENNSYLVANIA**Marital Status **SINGLE**

Bride's

Name **CAROL LYNN HICKS**Age **16** Birthplace **PA.** (State)

Bride's

Residence **POTTSVILLE, PENNSYLVANIA**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergyman or Authorized Officer

License Date **SEPT 17 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

JW

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

NOV 4 1985License Fee \$ **25.00****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

Certificate of Marriage

85-42098

State of Maryland

LICENSE NO.

130061

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)I Hereby Certify that on the 4TH day of NOVEMBER 9 1985the following persons were by me united in marriage at BALTIMORE CITY
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS P. GIQUINTO**Age **40** Birthplace **NEW JERSEY**
(State)Groom's Residence **TRENTON, NEW JERSEY**Marital Status **DIVORCED**Bride's Name **MARY H. GIQUINTO**Age **33** Birthplace **NEW JERSEY**
(State)Bride's Residence **TRENTON, NEW JERSEY**Marital Status **DIVORCED**

Relationship to groom if any

NONELicense Date **NOV. 5 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

NOV 5 1985

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

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